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COMMITTEE ON THE RIGHTS OF THE CHILD

CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES UNDER ARTICLE 44 OF THE CONVENTION

Periodic reports of States parties due in 1997

Addendum

PERU*,**

[25 March 1998]

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* The initial report of the Government of Peru (CRC/C/3/Add.7) was considered by the Committee on the Rights of the Child at its fourth session (see the final comments of the Committee (CRC/C/15/Add.8) and the summary records (CRC/C/SR.82, 83 and 84)).

** The core document (HRI/CORE/1/Add.43/Pev.1) contains the information submitted by Peru in accordance with the guidelines concerning the initial part of the reports of States Parties.

CONTENTS

	Paragraphs	Page
ACRONYMS		3
I. INTRODUCTION	1 - 5	5
II. ECONOMIC SITUATION	6 - 67	5
III. GENERAL MEASURES OF IMPLEMENTATION	68 - 134	20
IV. DEFINITION OF THE CHILD	135 - 158	38
V. GENERAL PRINCIPLES	159 - 237	43
VI. CIVIL RIGHTS AND FREEDOMS	238 - 297	55
VII. FAMILY ENVIRONMENT AND ALTERNATIVE CARE	298 - 453	69
VIII. BASIC HEALTH AND WELFARE	454 - 645	97
IX. EDUCATION, RECREATION AND CULTURAL ACTIVITIES	646 - 745	140
X. SPECIAL MEASURES OF PROTECTION	746 - 950	159
XI. CONCLUSION	951 - 955	194

ACRONYMS

ADD	Acute diarrhoeal disease
ADEC/ATC	Association of Labour for Development
AFP	Acute flaccid paralysis
APRODESCO	Association to Promote School Sports
ARI	Acute respiratory infection
CEDAPP	Centre for Development and Psychosocial Counselling
CEDRO	Centre for Information and Education for the Prevention of Drug Abuse
CEI	Early education centre
CEPRODEP	Centre for Population Welfare and Development
CESIP	Centre for Social Research and Publications
CIAS	Interministerial Commission for Social Affairs
CNA	Children's and Adolescents' Code
CONTRADROGAS	Commission to Combat Drug Use
CONTRASIDA	National Plan to Combat the AIDS Virus
COOPOP	People's Cooperation Office
COORDIPLAN	National Coordinating Commission for Family Planning and Reproductive Health Policies
COPUID	Technical Committee for Drug Abuse Prevention
CRECER	Project for the Evaluation of Academic Performance
CRED	Growth and Development Subprogramme
CZAP	Area approval committee
DIVIPOLNA	National Police Division for Children and Adolescents
EAP	Economically active population
EBI	Multicultural bilingual education
ECT	Encephalocranian trauma
ENACE	National Buildings Corporation
ENAHO	National household survey
ENDES	Population and family health survey
ENNVID	Survey on living standards
EPI	Expanded Programme on Immunization
FONAVI	National Housing Fund
FONCODES	Social Compensation and Development Fund
GDP	Gross Domestic Product
IDB	Inter-American Development Bank
ILO	International Labour Organization
INABIF	National Family Welfare Institute
INADE	National Development Institute
INEI	National Institute of Statistics and Data Processing
INFES	Institute of Education and Health Infrastructure
IPD	Peruvian Sports Institute
IPEC	International Programme on the Elimination of Child Labour

ACRONYMS (cont.)

IPSS	Peruvian Social Security Institute
ISN	Child Health Institute
MAMIS	Child health abuse units
MANTHOC	Movement of Working Children of Christian Workers
MELA	Exclusive breast-feeding
MINED	Ministry of Education
MINSA	Ministry of Health
MNNATSOP	National Movement of Organized Child and Adolescent Workers in Peru
OPD	Decentralized public agency
OPPV	Strategy for the elimination of missed vaccination opportunities
ORT	Oral rehydration therapy
PAHO	Pan American Health Organization
PAR	Project of Support for Resettlement
PCM	Presidency of the Council of Ministers
PECOS	Special Programme of AIDS Prevention
PLANCAD-EBI	National Plan of Multicultural Bilingual Training
PMD	Psychomotor development
PNAI	National Plan of Action for Children
PNP	Peruvian National Police
PNPF	National Family Planning Programme
PROCETSS	Programme for the Control of Sexually Transmitted Diseases and AIDS
PRODEI	Project of Integrated Development
PROMUDEH	Ministry for the Advancement of Women and Human Development
PRONAA	National Food Aid Programme
PRONEDDI	National Programme for the Prevention and Control of Iodine Deficiency Disorders
PRONOEI	Non-institutional early education programmes
PROSIM	Comprehensive Maternal Health Programme
RED IBFAN	Network of international action concerning child nutrition
RH	Reproductive health
SAIS	Children's Food Services
STD	Sexually transmitted disease
UNEBI	Multicultural Bilingual Education Unit
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
USE	Education Service Unit
WB	World Bank
WCA	Women of childbearing age
WHO	World Health Organization

I. INTRODUCTION

1. Following the signature by the Peruvian Government of the Convention on the Rights of the Child and further to the mandate established in the Convention concerning the obligation of States parties under article 44, paragraph 1 (b), of the Convention, Peru has prepared the national periodic report on the implementation of the Convention during the period 1993-1997, describing what has been done by the various public and private institutions to promote the rights of Peruvian children and adolescents over the last five years. It should be noted that the first report was submitted to the Committee in 1992.

2. The developments, achievements and advances with regard to Peru's child population reflect the goals of the 1992-1995 National Plan of Action for Children in such areas as education, health, sanitation and justice and put into effect the Children's and Adolescents' Code.

3. In addition, for a better understanding of the context in which these developments, achievements and advances occurred with respect to the rights of Peruvian children and adolescents, this national periodic report contains a description of the most important economic and social factors in relation to the overall situation affecting the population of Peru.

4. It should be specified that this report concentrates on instruments, legal provisions, programmes and activities and also includes data and indicators, including those which best reflect both the state of Peruvian society and the measures and actions adopted and their effect on the segments of the population consisting of children and adolescents. As regards the structure and topics for inclusion, this report follows the instructions given by the Committee on the Rights of the Child in the "General guidelines regarding the form and content of initial reports to be submitted by States parties".

5. Two systems of data collection were used for the preparation of this report. Firstly, a Working Group was established, consisting of representatives of the public and private sectors; this facilitated the provision of information about the actions and achievements of each of the institutions involved in the welfare of Peruvian children and adolescents. Secondly, workshops were organized with the participation of representatives of State and private bodies. The Ministry for the Advancement of Women and Human Development (PROMUDEH) especially thanks all those institutions which participated and provided information for this report.

II. ECONOMIC SITUATION

6. The national economy is currently stable with cyclical growth, within the context of globalized competition. Although the effects of economic stabilization and the major sacrifices of the population have somewhat lessened over time, some factors still exist which continue to create social pressure. The politicians heading the present Government and the opposition agree that the major unsolved problem is the lack of jobs and maintain (with differing but no less valid opinions) that despite social investment there are not enough jobs to meet the increased demand in certain places with a high rate of poverty.

7. Despite success in increasing social spending and private investment, much remains to be done to establish priorities within each social sector in order for social spending to be effective.

8. A description is given below of the processes, achievements and advances in economic policy, employment policy and social policies applied in the national economy during the period 1993-1997. A brief account is also given of the situation with regard to poverty and living standards, with specific social indicators.

Evolution of the economic situation

9. It should be recalled that in the period prior to the one under consideration - in other words, the period between 1990 and 1992 - the national economy was successfully stabilized, after experiencing galloping inflation, accompanied by a policy of isolation from the international economy.

10. Since 1990, Peru's economic policy has been outward-looking and geared to the global economy. Various shortcomings as regards inter alia productivity, technology and human resources made it difficult and traumatic for the Peruvian economy to become internationally competitive. With a heavy legacy of low productivity and a work force discouraged by losses in real income, during the period 1993-1997 Peru had to accept a typically cyclical pattern of economic growth. This was partially corrected, during the second half of 1996, by a short-term policy of economic restraint and a policy shift towards sustained growth in the medium term. This is illustrated in GDP figures. GDP growth fluctuated: 6.5 per cent in 1993, 12.7 per cent in 1994, 7.8 per cent in 1995 and 2.6 per cent in 1996. It is estimated that in 1997 Peru's annual average growth rate will be 5 per cent.

11. The domestic economy breaks down into two distinct markets: urban and rural. As was the case in other Latin American societies, Peru is experiencing a high rate of urban growth. The urban population accounted for 65 per cent of the total in 1981 but had risen to about 70 per cent in 1993. While the departments and provinces with mainly urban populations are integrated in the market economy, Peru still has many rural villages where the population suffers because of the remoteness of public services. In rural areas, data collected in 1994 revealed a widely dispersed population: the average distance from a post office was 10 kilometres, from a primary school 2.2 kilometres, from a physician 8.7 kilometres and from a health centre 5.7 kilometres.

Results of Peruvian economic policy

12. During the period 1993-1997, the national economy overcame several shortcomings in its initial overall configuration (extensive commitments for external debt repayment, technological backwardness of production mechanisms) to become part of the global economy. After achieving economic stability, Peru tackled several challenges simultaneously: retooling of production mechanisms, initiation of reform of the State's institutional machinery, reduction of the external imbalance and acceleration of the process of modernization of the economy without neglecting the social sector.

13. During 1992, the economic stabilization initiated in 1990 continued. In that year, the system of taxation was overhauled and reduced to six types of taxation, the new Tax Code was adopted and broader powers were given to the National Tax Oversight Agency to monitor tax evasion. The financial sector, for its part, suffered serious setbacks and some banks, particularly those owned by

the State, were closed. Negotiation of the external debt continued and resulted in specific agreements concerning consolidation, scheduling, cancellation and exchange of debt for social investment. This all improved the health of the national economy and promoted the resumption of conventional relations with the international financial system, as well as a certain internal political stability.

14. The actual situation in 1992 was difficult. Domestic savings continued to decline and reached barely 12.5 per cent of GDP; although inflationary trends lessened, the annual rate of inflation was 73.5 per cent and GDP declined by 1.8 per cent. Economic stability improved in 1993, with significant gains in the pacification of the nation. Fiscal discipline and reduction of monetary expansion contributed to the 6.5 per cent growth in GDP in 1993, the lower annual rate of inflation of 48.6 per cent and the mobilization of long-term overseas savings which financed the external deficit. The process of privatization was also accelerated, resulting in an influx of foreign capital. Domestic savings and total savings grew, reaching 13.3 per cent and 18.5 per cent of GDP respectively.

15. In 1994, economic trends were quite favourable, as a result of the stabilization efforts, structural reforms, incorporation of the economy in international markets and pacification of the country. The GDP growth of 13 per cent was the highest in recent years. In addition, inflation dropped to 23.7 per cent a year and domestic and total savings rates increased to 16.9 per cent and 21.5 per cent of GDP respectively. Although the external current account deficit was greater than in the previous year, the balance of payments showed a surplus on external accounts, because of the foreign capital developments associated with privatization and the influx of short-term capital.

16. The positive economic tends continued in 1995, encouraged by the growth in investment and domestic consumption and in the volume of exports. There was GDP growth of 7 per cent, a higher level of domestic savings (about 17 per cent) and low inflation (annual average of 11.1 per cent).

17. During this period, there continued to be less growth in liquidity and credit. In addition, a strict public spending policy led to improvements in the fiscal situation, so that monetary policy could be relaxed. Nevertheless, the pattern of private spending, particularly on capital goods, led to a growth in imports and an increase in the external current account deficit (from 5.1 per cent of GDP in 1994 to 7.2 per cent in 1995). Important progress was also made in the financial sector. Under the Brady Plan, an agreement was concluded with the creditor bank to reduce the principal and interest of the external debt. This improved access to international credit, especially for manufacturing activity.

18. After achieving high rates of economic growth, in 1996 economic policy concentrated on seeking the conditions for sustained long-term growth. With this aim, domestic demand was encouraged to rise to levels compatible with national productivity and a reduction in the external current account deficit was achieved. Albeit with certain hesitations and delays, economic policy is making corrections to overcome and eliminate internal and external factors which pose a threat to growth with stability.

19. Public finances improved as a result of the increase in the tax burden from 13.6 to 14.2 per cent of GDP between 1995 and 1996. The growth in the external current account deficit to over 50 per cent made it necessary to adopt a policy of restraint, which led to GDP growth of about 2.6 per cent. Inflation remained stable at 11.5 per cent a year on average.

20. At the end of 1996, the nation still had problems which had not been tackled satisfactorily: unemployment, poverty and aftermath of domestic violence by armed terrorist groups in the process of disappearing; and unfinished reform processes initiated by the State.

21. In 1997, progress was made in the reform of the administration of justice and two important laws were enacted (one on the modernization of social security and one on the health sector), which gave legal backing to the recently initiated reform of the health system. In addition, policies and actions continued to be pursued with the aim of improving the standard of living of children and adolescents, both through "school health insurance" and through the inclusion of the bachillerato in the education system.

Labour policies

22. Important changes were made in order to bring the labour sector into line with the liberal economy. A new legal framework was evolved to promote employment, simplify collective labour relations and establish a private pension system based on ability to contribute and individual benefit. The guiding criterion was the need to make the labour market more flexible, in order to liberalize the rules of the game for the labour force.

23. The State sector was also reorganized, through incentives for voluntary redundancy. As a result, fewer workers participated in the modern sector (38.5 per cent in 1992 compared with 48.9 per cent in 1991). The reduction in the State apparatus was accompanied by a review of institutional functions, with some resulting improvements in administrative efficiency and labour discipline.

24. The private pension system in the labour sector was launched in 1993, replacing the distribution system by a system of individual accounts. In that year, improved policy guidelines were adopted for the social sector, resulting in a better allocation of resources destined for projects of poverty relief. A new pattern of distribution of earned income emerged: real salaries rose (16.6 per cent) and real wages declined (0.8 per cent) in metropolitan Lima.

25. In addition, income distribution became more differentiated. In metropolitan Lima, remuneration increased by 23 per cent for salaries and 15.7 per cent for wages. This trend was accompanied by a drop in unemployment from 9.9 per cent in 1992 to 8.8 per cent in 1993 and by a reduction of 7 per cent in the proportion of poor people compared with 1991. This positive outcome of the stabilization measures meant that workers recovered real income lost in earlier years and was due to the fact that workers trained in new technology were more competitive than unskilled workers.

26. The process of labour reform was intensified in 1995. Act No. 26513 amended the Act on Job Creation as regards arrangements for fixed-term recruitment, termination of the labour relationship and juvenile training

contracts. In addition, Act No. 26504 amended the legislation on pensions and other workers' contributions.1/ Urban unemployment fell from 8.4 per cent to 7.9 per cent between 1995 and 1996. In 1996, the best results were achieved for women: for men unemployment rose by half a percentage point, whereas for women it fell by almost two percentage points.

27. Unemployment among the urban population over 14 years of age was 7.9 per cent, or half a percentage point lower than in 1995 (8.4 per cent). This reduction is explained by the decrease in female unemployment from 11 per cent to 9.1 per cent, while male unemployment increased from 6.7 to 7.2 per cent over the same period. Unemployment among adolescents between 14 and 19 years of age was 15.1 per cent; this affected the average rate of unemployment, since about half of the unemployed members of the economically active population (EAP) are young people. This indicator was highest on the northern seaboard (10.1 per cent) and on the southern seaboard (11.4 per cent).

28. As regards the gender breakdown of the unemployed members of the EAP, women are in a better position and account for 47 per cent in 1996, compared with 51 per cent in 1995. A large number of unemployed were seeking work for the first time in 1996 (18.8 per cent). Retailers, travelling salesmen and household employees account for 30.2 per cent of the employed members of the EAP in 1996; and the proportion of unpaid family workers increased from 5.7 per cent in 1995 to 7.1 per cent in 1996. The process of labour reform intensified in 1995. Act No. 26513 amended the Act on Job Creation with regard to arrangements for fixed-term recruitment, abolished employment stability and introduced juvenile training contracts. Act No. 26504 amended the legislation on pensions and other workers' contributions.2/

29. In general, it will be seen that during the period 1993-1997 positive changes were introduced in the labour market: these included an increase in the real income of skilled workers and a reduction in female unemployment. This market became more transparent and competitive, with better results as regards labour negotiations and recruitment of skilled personnel residing in the principal cities of Peru. However, this is not true across the board and, in particular, does not apply to the bulk of the labour force consisting of unskilled workers. Consequently, the labour market still has high rates of structural unemployment - a problem which will be resolved in the medium and long term.

30. One group of workers severely affected by the shortage of jobs consists of young people. Seeking solutions which would be effective immediately, the Government realized the complexity of the labour market and introduced training programmes and business incentives to bring young people into the world of work. Attention is being given to the suggestions made by some analysts regarding the need for fine tuning of the current economic policy; the proposals are based on the fact that it is unfair to submit the Peruvian economy to "blind" international competition, since there is a risk of losing in certain production activities. Although differences of opinion still exist regarding current

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1/ Peruvian Central Reserve Bank, 1995 report, pp. 27 and 32.

2/ Peruvian Central Reserve Bank, 1995 report, pp. 27 and 32.

economic policy, particularly some of the details of the policy of economic liberalism, there is no wish or intention to return to the protectionism of the past.

Social policies

31. The action of the State is based on the fundamental principle that children represent the country's most valuable capital. The approach of the Government has been reflected in strong support for children's development, within the context of a social policy which accords priority to poverty relief. Initially, this concern was spelled out in the 1992-1995 National Plan of Action for Children, whose goals and targets were included in the design of the Poverty Alleviation Strategy implemented by the Government between 1993 and 1995. The aim of this Strategy was to lay the foundations for the formulation of a medium-term strategy for poverty relief.

32. As part of this strategy, the Ministry of the Presidency was established; it comprises the various institutions which had been implementing social programmes. In addition, a series of provisions were enacted to organize actions under the social programmes in the Poverty Relief Strategy. For example, the Social Compensation and Development Fund (FONCODES) 3/ was set up as a decentralized body currently located in the Ministry of the Presidency, as part of a social strategy designed to improve the living conditions of the impoverished population. This fund is geared to the financing of social investment projects which require the community to be organized in "action groups". The community identifies and prioritizes its needs with respect to nutrition, health, education, basic sanitation, agricultural infrastructure, transport, energy and productive activities. In the first year, the budget of 116 million soles was used to finance projects to promote temporary employment and provide social support.

33. In addition, with the aim of modernizing and developing the education system provisions were enacted which made significant changes affecting management, financing and improvement of the quality and coverage of education needs through public education programmes and services.4/

34. Expenditure by the Peruvian Government on poverty relief programmes amounted to 577 million in 1993, equivalent to 0.7 per cent of GDP. FONCODES channelled most of these resources (338 million new soles). An amount of 116 million new soles was allocated to the Glass of Milk Programme and 66 million new soles were allocated to the National Food Aid Programme (PRONAA), which is currently administered by the Ministry for the Advancement of Women and Human Development (PROMUDEH). The latter programme was authorized to purchase agricultural products which constituted seasonal surpluses, for distribution to severely impoverished families. In addition, resources were allocated to other programmes such as the School Emergency Programme, People's Cooperation and the Fund for Epidemiological Control.

3/ Established in August 1991 by Decree Law No. 657, amended by Decree Law No. 26157.

4/ Peruvian Central Reserve Bank, 1992 report, p. 26.

35. In mid-1993, in the Consultative Group on Social Support to Peru, our country presented the Social Support Programme which it implemented up to 1995. In that context, a commitment of aid amounting to approximately US$ 930 million was given by the World Bank and the Inter-American Development Bank. This amount, which includes soft loans, grants-in-aid and debt cancellation, was to be channelled to projects involving social infrastructure rehabilitation and provision of basic social services (primary education, basic health care and nutrition).5/

36. Under the General Budget Law, the Programme of Priorities for Basic Social Spending was initiated in 1994 and concentrated on three priority sectors: education, health and justice.6/ In the education sector, the Special Programme for the Improvement of the Quality of Primary Education was designed to improve the quality of teaching, to replace and rehabilitate educational infrastructure and to modernize the administration of education. It is therefore important to identify the poorest inhabitants, since services must reach those in need if they are to be effective. Spending is prioritized through technical instruments such as the "poverty maps" drawn up by FONCODES. These maps show average levels of poverty in each district throughout the country, indicating unmet basic needs such as water, drainage, electricity, quality housing, child nutrition and literacy. In this way, 419 districts were identified for priority action.

37. Food aid is provided by the Government through various programmes such as (PRONAA), school breakfasts and food support at health centres and units for the most vulnerable groups. In addition, the Glass of Milk Programme reaches 10 per cent of the national population. In 1994, milk was provided to one out of four children under six years of age, to 14 per cent of minors between 6 and 14 years of age and to 6 per cent of the adult population between 15 and 49 years of age, especially pregnant and nursing women. However, because of distribution problems the programme does not reach 64.5 per cent of severely impoverished children under six years of age.

38. Poverty relief programmes continued in 1995 and the goal was to increase the efficiency of public spending. Resources amounting to 328 million new soles were allocated, including 222 million for the Programme of Basic Health for All, 38 million for education, 34 million for the Programme of Food Supplements for high-risk groups and 34 million for the programmes of basic justice of the Judiciary and the Public Prosecutor's Department. Various other programmes were continued such as the glass of milk, school breakfasts, epidemiological services, Ombudsmen for Children and Adolescents, family planning, child abuse prevention packages, vocational training for young people and skills training for women.

5/ Peruvian Central Reserve Bank, 1993 report, pp. 31 and 32.

6/ Peruvian Central Reserve Bank, 1994 report, pp. 28 and 29.

Table II.1

Peru: principal social programmes

Programmes and projects	
1. Improvement of basic spending	
Improvement of education quality	Ministry of Education
Basic education for all	Ministry of Education
Teacher training	Ministry of Education
Infrastructure improvement	Ministry of Education
Educational materials	Ministry of Education
Bilingual education	Ministry of Education
Education for life	Ministry of Education
Wawa-wasi day care centres	PROMUDEH
Basic health for all	Ministry of Health
Reinforcement of health services	Ministry of Health
Health and basic nutrition	Ministry of Health
Project 2000	Ministry of Health
Shared administration	Ministry of Health
Prevention of micronutrient deficiencies	Ministry of Health
Insurance for schoolchildren	Ministries of Health and Education
2. Poverty relief	
FONDOCES	Ministry of the Presidency
INFES	Ministry of the Presidency
ENACE	Ministry of the Presidency
Materials bank	Ministry of the Presidency
FONAVI	Ministry of the Presidency
Glass of milk	Municipalities
Poverty relief in Lima marginalized urban areas	Ministry of the Presidency
COOPOP	PROMUDEH
PRONAA	PROMUDEH
INABIF	PROMUDEH
Resettlement support (PAR)	PROMUDEH
Ombudsmen for Children and Adolescents	PROMUDEH
School breakfasts	PROMUDEH, Ministry of the Presidency
Family planning	Ministry of Health
Epidemiological services	Ministry of Health
Kusiayllu	Ministry of Health
Child abuse prevention packages (MAMIS)	Ministry of Health
PRONAMACHS	Ministry of Agriculture
Social infrastructure projects	Ministry of Energy and Mines
Civic action	Ministry of Defence
Rural roads	Ministry of Transport
3. Other social programmes	
Vocational training for young people	Ministry of Labour and Social Welfare
Vocational training for women	Ministry of Labour and Social Welfare
Support for food security	Ministry of Agriculture

39. The aim of the Plan for the Improvement of Basic Social Spending is to give the population access to improved basic services in the areas of health, education and justice. Health care will be upgraded, including nutrition supplements for the high-risk population. The educational objectives are to improve the provision of education in the rural, marginalized urban and frontier areas, with emphasis on early and primary education, on the education modality for minors and on literacy. The Government also took action to strengthen the education system by means of teacher training and support for improving pupils' academic performance, with provision of texts and educational material. The priority given by the Government to social policies is reflected in the increasing budget allocations for social sectors in recent years, as will be seen from table II.2.

Table II.2

Peru: social spending by the central Government, 1970-1996
(as a percentage of total spending)

	1970	1980	1990	1994*	1995*	1996*
Education	19	13	12	14	20	21
Health	6	5	4	5	10	10
Other 1/	2	2	0	7	10	9
Total	27	20	20	35	40	40

Sources: National Institute of Statistics and Data Processing, Ministry of Economy and Finance and Democratic Constituent Congress, 1995.

* Amount allocated in the budget of the Republic for the year in question. IPSS included.

1/ Glass of Milk Programme, INABIF, FONCODES and PRONAA.

40. With regard to health, efforts are continuing to expand coverage and access to a specific basic health package, with emphasis on efficiency, quality and equity, which will make it possible to reach a specific minimum standard of quality and quantity in the provision of regular services and to ensure primary health care. There has been an improvement in infrastructure, provision of resources and local management of health centres.

41. As soon as the location of basic health needs was known, a comprehensive care strategy was evolved to provide basic health services to users. This strategy is accompanied by a plan for the universal provision of a basic health package. In 1997, the Ministry of Health (MINSA) initiated a pilot programme for comprehensive care involving a specific basic package provided, in particular, to certain first-level health facilities including health centres and units.

42. Under the programme for basic health priorities, laurched in 1994, various improvements have been made in services provided to clients of MINSA. First of

all, emphasis was placed on reactivating and reopening first-level and second-level facilities, particularly those located in the country's poorest districts. Next, prevention and promotion activities were resumed, with special attention to programmes for women and children. Opening hours were extended, physical infrastructure was improved, health workers were trained and outreach activities of health facilities were stepped up.7/ The results of these improvements include: reactivation of the operational infrastructure and service infrastructure at 4,422 facilities and inclusion of 544 facilities in the arrangements of shared administration in the local community.

43. Programmes in the area of justice have concentrated on the expansion and improvement of basic justice provided at the offices of justices of the peace 8/ (with or without legal qualifications), special and civil/criminal courts of the Judiciary and various provincial procurators' offices. Significant progress has been made in administrative arrangements for management, both in human resources training and in equipment. However, there is still much to be improved in the application of standard procedures and universal norms.

44. The administrative machinery of the judicial system has been modernized under a programme launched in 1995. Firstly, various working commissions were set up with the participation of judges and members from all over the country, with the goal of dealing with a serious backlog of cases from previous years. About 80 per cent of this backlog had been eliminated by the end of 1997. Secondly, 2,136 surplus staff (judges and employees) in judicial institutions were laid off during the administrative reorganization. As a result, staff became more motivated, better trained and better paid. The administrative system adopted is more transparent and orderly, as a result of the introduction of new equipment and computerized systems. The actual result benefits users of the judicial system, since judges have more time and are better organized to deal with and settle cases.

45. Other improvements in the Judiciary relate to the creation of courts to conduct trials in prison, which eliminate or reduce escapes during transfers of prisoners, since the judges travel to prisons in all the judicial districts; they also speed up the hearing of criminal cases. Mention may also be made of the creation of mobile and decentralized courtrooms in different parts of Peru, in order to facilitate access to justice, particularly in places far from the principal Peruvian cities.

46. Migration continues to be widespread among the Peruvian population, despite the fact that the Government has made quite decentralized social investments in many of the departments where poverty is acute (Ayacucho, Apurimac and Huancavelica, among others). For instance, 34 per cent of persons

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7/ Report on the Programme of Basic Health for All.

8/ The offices of justices of the peace, as judicial organs, are mainly mediation bodies and are authorized to propose alternatives. The cases which they decide include: requests for alimony, evictions and injunctions. They are located in urban and rural areas selected by the Executive Council of the Judiciary.

over 15 years of age live somewhere other than the place where they were born. Metropolitan Lima and the jungle have the largest influx (43 per cent of the population over 15 years of age in Lima come from elsewhere). The main reason has been found to be the search for work (70 per cent), as well as terrorist violence.

47. As part of the Prioritized Strategy for the Relief of Severe Poverty, 9/ the Government intends to reduce severe poverty by half by the year 2000 and has accordingly allocated 40 per cent of the national budget of the Republic to the social sector. The strategy seeks to achieve greater equity through social investment which will make it possible to improve opportunities and skills in the poorest sectors of the country, particularly the most vulnerable groups.

48. The 1995-2000 National Plan of Action for Children (PNAI) 10/ is part of this strategy, since poverty relief must start with Peruvian children. The Plan reflects the commitment of the Government and of civil society to contribute to the attainment of the goals for the decade set at the 1990 World Summit for Children and represents an instrument of social policy for the Government.

Poverty and standards of living

49. The number of impoverished persons dropped between 1991 and 1994. The overall percentage declined from 55.3 to 48.2 and from 24.2 to 18.3 in the case of the severely impoverished. The breakdown of spending by item of consumption revealed that the average Peruvian spends 49 per cent of his budget on food, 6.2 per cent on education and barely 1.1 per cent on health care.

50. During 1994, the resources for poverty relief programmes grew as a result of State contributions of 678 million new soles. The principal programmes were FONCODES, the Glass of Milk Programme, PRONAA, the Programme of Epidemiological Control and Popular Cooperation. Of the 339 million new soles spent by FONCODES, 60 per cent were for social infrastructure, 20 per cent for economic infrastructure, 12 per cent for social welfare and 8 per cent for development of production.

51. Although in that year there was a reduction in levels of poverty, almost 50 per cent of Peruvians are impoverished. The poor have less access to public services such as water supply, which is available to 48 per cent of the severely impoverished, compared with 70 and 82 per cent respectively in the case of families which are not severely impoverished or which are not impoverished. There is also an inverse relationship between poverty and education: only 10 per cent of households headed by a person with higher education were classified as poor, compared with almost 70 per cent of households headed by an illiterate person.

52. Using the poverty line method, in 1994 it was calculated that 49.6 per cent of the national population, 68.3 per cent of the population of the rural

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9/ Approved by Ministerial Decision No. 262-96-PRES.

10/ PNAI was approved by Supreme Decree No. 003-97-PROMUDEH in May 1997.

jungle areas and 69.7 per cent of the population of the rural forest areas were impoverished. In Peru, the poor live mainly in the rural mountain areas (27 per cent) and in metropolitan Lima (21 per cent).

53. The breakdown of poverty among the population over six years of age by level of education indicates that 58 per cent of the less educated and 27 per cent of the more educated are poor. Men head 83 per cent of households and 42 per cent of all Peruvian households are impoverished. There was a decline in poverty between 1991 and 1994: the impoverished population declined from 55.3 to 49.6 per cent and the severely impoverished population declined from 24.2 to 20.2 per cent.

54. It may be useful to highlight some salient features of the poverty relief efforts. Firstly, decisions on social spending are centralized in one entity, the Ministry of the Presidency, although functions are delegated and decentralized to the various entities under that Ministry: the Social Compensation and Development Fund (FONCODES), the National Housing Fund (FONAVI), the Institute of Education and Health Infrastructure (INFES), the National Development Institute (INADE), the National Food Aid Programme (PRONAA) and the National Family Welfare Institute (INABIF). The latter two institutions have since October 1996 been part of the Ministry for the Advancement of Women and Human Development (PROMUDEH). Secondly, in view of the nature of the problem of poverty relief between 1993 and 1995, a new strategy was embodied in the 1996-2000 poverty relief plan. This plan contained a commitment to reduce severe poverty by half and to focus actions and prioritize the needs of the severely impoverished population. The growing public spending on the social sector was also important and the figure increased from US$ 12 per capita in 1990 to US$ 160 per capita in 1997.

55. Among other actions designed to reduce poverty, the Peruvian Government signed the Rome Declaration on World Food Security aimed at achieving food security for all (13 November 1996). Act No. 26537 of 9 January 1996 specified that in Peru all social programmes of food relief should preferably use local products.11/

56. The programmes geared to poverty relief are continuing and have been supplemented by action designed to increase the efficiency of public spending. During 1995, 328 million new soles were spent, of which 67.7 per cent went to the Programme of Basic Health for All, 11.6 per cent to education, 10.4 per cent to the Programme of Food Supplements for high-risk groups and the remaining 10.3 per cent to the programmes of basic justice of the Judiciary and the Public Prosecutor's Department.

57. All the social actions undertaken by the Peruvian State, combined with the participation of the public, have contributed to the reduction of poverty. The various measurements of living standards and poverty in recent years all indicate a trend towards less poverty and more income. For example, surveys of standards of living have revealed successive declines in poverty among the Peruvian population: in 1991 over half of the population (54 per cent) but

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11/ Rural development, food security and poverty relief, report of the Working Group. CIED, FOVIDA, INCAFAM, CEAS and IPEMIN, July 1997.

47 per cent in 1994. In 1996, there was a reduction to 44 per cent, which was more marked in the mountain and jungle areas, especially the rural ones.

58. Standards of living are indicated by data supplied by the 1994 National Household Survey (ENAHO). This survey yielded data on inter alia access to five public services: telephone, water, drainage, energy for food preparation and electricity for lighting. The data showed that only 11.8 per cent of households had a telephone and that 50 per cent had access to running water at home. More than one out of three households used firewood for food preparation, one third used gas and the remaining third used kerosene. Electricity was used by 66 per cent of the population and 5 per cent still used candles for lighting.

59. Nevertheless, 11 per cent of low-income families in the provinces used candles for lighting and only 42 per cent of them had electricity in 1994. In Lima and Callao, 98 per cent of high-income households had electricity. In the provinces, 68 per cent of poor families depend on firewood for cooking, which has important repercussions for the environment.

60. To sum up, poverty in Peru built up over several decades, prior to the 1990s; it is associated with educational disadvantages and with cultural patterns distant from those of the market economy, as well as exploitation of marginalized land using old-fashioned methods and without access to credit. It is difficult to overcome these adverse factors in a short period of time. In this connection, government action covering both education and public health sectors and promotion of an awareness of coexistence in a market economy are helping to improve current living conditions of Peruvians.

61. The Peruvian Government's efforts in recent years have involved increasing financial resources, reflected in social investments. The country's social spending on the social and economic infrastructures is aimed particularly at the most vulnerable groups, such as the poorest children and adolescents.

Table II.3

Peru: social investment by the Ministry of the Presidency between June 1992 and December 1997
(Millions of dollars)

	Areas of investment	Dollars	Percentage
I.	Social infrastructure	3,425	55
	Food and nutrition	258	4
	Health	90	1
	Education	1,029	17
	Housing	868	14
	Sanitation	1,180	19
II.	Economic infrastructure	2,591	42
	Agriculture	1,469	24
	Transport	360	6
	Electrification	762	12
III.	Multisectoral	208	3
	Total	6,224	100

62. The progress achieved with regard to nutrition and food, health, education, sanitation, housing, electrification, communications and agriculture during the 1990s can be seen from the following table.

Table II.4

Peru: progress achieved by the Ministry of the Presidency, 1992-1997

Concept	Period		Unit of measurement
	1992-1996	1997	
A. Food and nutrition			
School breakfasts	881,346	2,130,000	daily meals
Food distribution	486,300	6,100	tons
B. Health			
Construction of medical units	1,658	387	units
Construction of medical centres	427	45	medical centres
Improvement and expansion of hospitals	33	9	hospitals
Equipment			
Health facilities	472	84	facilities
Medicine kits	8,244	-	families
Total care	86,120	-	families
Family planning campaigns	-	83,184	families
C. Education			
Construction and rehabilitation of education centres	1,787	768	premises
Construction of classrooms	29,214	3,466	classrooms
Construction of community centres	1,040	39	community centres
Playgrounds	559	109	playgrounds
Desks	320,304	371,092	two-person desks
School furniture	36,194	5,340	modules
Module, laboratory, libraries, workshops	4,344	4,069	modules
School kits and knapsacks			
Literacy kits	21,229	87,508	kits and knapsacks
Machinery and industrial equipment	758,165	-	kits
Microcomputers	61,613	26,850	units
School sweatshirts	8,790	-	units
School shoes	1,117,339	1,116,071	sweatshirts
School sneakers	2,000,000	1,000,000	pairs of shoes
Corrugated metal sheets	1,000,000	-	pairs of sneakers
T-shirts	668,547	-	sheets
	-	500,000	T-shirts
D. Sanitation			
Drinking water and sewage systems	5,265	7,200	kilometres
Construction of wells and reservoirs	1,229	1,144	wells and reservoirs
FONAVI direct credits	1,102,936	120,020	completed lots
FONAVI support to EPS	593,889	170,363	lots
Sedapal sanitation programme: water, drainage	550,000	450,000	families
EPS rehabilitation projects	65	183	projects
Technical and feasibility studies	35	193	studies
Improvement of sewage system - Lima	10%	90%	engineering designs
Construction of latrines and sanitary facilities	27,290	37,566	latrines/sanitary facilities
Construction and upgrading of sewage treatment plants	155	8	plants
Updating of real estate records - Lima	-	34,000	units
Purchase of meters, 1st phase	-	20,000	meters
Installation and upgrading. Drainage in Lima shantytowns	415,000	-	inhabitants
Tank trucks	112	-	tank trucks
E. Housing			
Construction of housing	253,661	166,259	loans
Multi-family apartments	6,287	2,674	finished apartments
Slum clearance	-	379	apartments
F. Electrification			
Primary and secondary electricity grids	1,876	1,732	kilometres
Transmission lines	216	142	kilometres
Electrification of settlements	592,604	104,820	lots
Mini power plants	34	17	units

Concept	Period 1992-1996	Period 1997	Unit of measurement
G. Communications			
Construction and improvement of roads	6,970	1,668	kilometres
Upgrading and maintenance of roads	25,941	3,067	kilometres
Construction and improvement of bridges	441	759	bridges
Construction of streets and avenues	251	156	kilometres
Construction of barges	1,000	-	barges
H. Agriculture			
Construction and improvement of canals	12,659	1,516	kilometres
Expansion of agricultural area	302,218	119,000	hectares
Improvement of irrigation/operation and maintenance	359,818	-	hectares
Major irrigation infrastructure	992	248	kilometres
Farm credits	12,412	5,021	loans
Reintroduction of alpacas	45,298	12,600	heads
Forestation and reforestation	130,336	10,846	hectares
Hoes	1,000,000	500,000	hoes

* Includes expansion by road construction - Jungle Project.

Some social indicators

63. The Government's social policy accords priority to the poorest inhabitants and households. The 1996 ENAHO analysed the coverage of the main social programmes and noted that the successes achieved included the provision of a social and economic infrastructure and improved access to health services through prevention, promotion and assistance to the population.

64. The 1996 ENAHO found that 61.4 per cent of households benefited from at least one social programme. Participation in these programmes was greater for rural households (77 per cent) than for urban ones (53 per cent). Health and nutrition programmes reached the most people - a total of 49.8 per cent of households. Health programmes reached 48 per cent and food aid programmes reached 42 per cent of households. The latter programme includes food aid for children under five, school meals, food for pregnant and nursing women, food for work and food aid to other vulnerable groups. Families living in the regions of the northern mountains, the southern mountains and the jungle benefited most from health programmes, which shows that more social support is reaching the most needy areas of Peru.

65. State-provided education benefited 54.6 per cent of households. Of the heads of household surveyed, 54.3 per cent considered that there had been improvements in the school infrastructure. Literacy campaigns concentrated on the rural areas (81 per cent). Training for young people benefited 73 per cent of urban households and women's skills training was given to 60 per cent of urban households and to 40 per cent of rural households.

66. In 1996, 70 per cent of Peruvian households received health care at facilities of the Ministry of Health. Health programmes targeting special groups reached 48 per cent of households. They were mainly geared to urban households, with the exception of the nutritional surveillance programme, from which slightly more rural inhabitants benefited (50.8 per cent).

67. Among the programmes of credit for housing, urban households received more support (7 per cent) than rural households (0.4 per cent) during the last two years prior to the survey. The funds from programmes of social investment were shared equally between urban and rural households.

III. GENERAL MEASURES OF IMPLEMENTATION

68. Peru has recently introduced improvements and adopted various new legal instruments concerning civil rights, all of which are highly appropriate and relevant for the consolidation of the rule of law. In the area of law and social action on behalf of children, the Peruvian State has endeavoured to formulate plans and to set up special bodies to deal with specific topics, many of which are part of the newly created Ministry for the Advancement of Women and Human Development (PROMUDEH).

69. Action plans to benefit children (45 in number) have been formulated and implemented at the national, regional, provincial and district levels. In addition to these useful action plans, the 1996-2000 National Plan of Action for Children sets quantitative targets, particularly with regard to education. The targets set, as part of activities to promote development goals, include universal basic education and reduction of illiteracy.

70. An account is given below of the most noteworthy principles and actions in favour of children and adolescents contained in the legal instruments in force and in the programmes implemented by the various institutions involved in the defence of the rights and welfare of children and adolescents.

71. Starting in 1990, Peru adopted the economic philosophy prevailing in the world: free market economies and global competition. Within this context, Peruvian society embarked on a new phase of its history by adopting very important legislative changes, including the Peruvian Political Constitution.

72. The new legislative instruments adopted during the period covered in this report include:

(a) The 1993 Political Constitution approved by referendum on 31 October 1993 and promulgated on 29 December 1993. This new Constitution is divided into six titles with 26 chapters, plus transitional and final provisions, making a total of 206 articles. Unlike the 1979 Constitution, which equated fundamental rights with human rights and included under that heading civil, economic, political and social rights, the new Constitution, in title I entitled "Concerning the person and society", draws a distinction between those rights. They are dealt with in chapter I entitled "Fundamental rights of the person", in chapter II entitled "Concerning social and economic rights", in chapter III entitled "Concerning political rights and duties" and in chapter IV entitled "Concerning the civil service".

(b) The Children's and Adolescents' Code promulgated on 29 December 1992 and in force since 27 June 1993. This was amended by Act No. 26497 entitled "Organic Law on the National Registry of Identity and Civil Status" of 25 July 1995 as regards articles 6 and 7 of the Code entitled "Right to a name, identity and nationality" and by Act No. 26324 as regards articles 192, 194 and 195 of the Code concerning the single procedure.

(c) The Organic Law on the National Registry of Identity and Civil Status (Act No. 26497), which created the National Registry of Identity and Civil Status. The Registry is responsible for organizing and maintaining the sole register of identity of natural persons and of recording facts and deeds

concerning their capacity and civil status. The first of its final provisions establishes that the special registries of the civil registry offices will continue the re-registration of births, marriages and deaths in places where the original registers had disappeared, been damaged or destroyed accidentally or maliciously, until units of the National Registry of Identity and Civil Status are set up in each of the places concerned.

(d) Act No. 26260 of June 1886, amended by Act No. 26763 entitled "Act on Family Violence". This legislation lays down the policy of the State and of society towards all types of family violence, which is considered to be any physical, psychological or moral ill-treatment inflicted on a person or persons within the family. This Act provides protection for spouses, partners, ascendant relatives, descendents, relatives and third parties provided that they live in the same household and are not linked by labour or contractual relations. It also establishes measures for victim protection.

(e) The amendments to the Penal Code regarding offences against sexual freedom. Article 178 states "In the case of offences covered by this article, the perpetrator shall also be sentenced to provide support for any resulting offspring, in accordance with the provisions of the Civil Code. Proceedings are closed in the cases covered by articles 170, paragraph 1, articles 171, 174 and 175. In the case covered by article 175, the perpetrator shall be exempt from punishment if he marries the victim, provided that she gives her free consent, in accordance with the law". This amendment was effected by Act No. 26770 of 11 April 1997. This Act is extremely important because previously perpetrators were exempt from punishment in the case of gang rape (two or more rapists) but now all perpetrators are to be tried and sentenced. Act No. 26788 adds to article 121 an article 121 A concerning offences against a person's life, body and health. The addition establishes that "In the cases covered by the first part of the preceding article, when the victim is under 14 years of age and the perpetrator is the father, mother, guardian, caregiver or person responsible for the victim, the penalty shall be deprivation of liberty for not less than five or more than ten years, suspension of parental authority under article 83 (b) of the Children's and Adolescents' Code and disqualification as specified in article 36, paragraph 5. The same penalty shall apply when the perpetrator is the spouse, common law partner, older relative, natural or adoptive descendant or collateral relative of the victim. If the victim dies as a result of the injury and the perpetrator could foresee this result, the penalty shall be deprivation of liberty for not less than six or more than 15 years." In addition, an article 122 A is added to article 122 specifying "In the cases covered by the first part of the preceding article, when the victim is under 14 years of age and the perpetrator is the father, mother, guardian, caregiver or person responsible for the victim, the penalty shall be deprivation of liberty for not less than three or more than six years, suspension of parental authority under article 83 (b) of the Children's and Adolescents' Code and disqualification as specified in article 36, paragraph 5. The same penalty shall apply when the perpetrator is the spouse, common law partner, older relative, natural or adoptive descendant or collateral relative of the victim. If the victim dies as a result of the injury and the perpetrator could foresee this result, the penalty shall be deprivation of liberty for not less than four or more than eight years." These additions were made in order to bring national legislation into line with the Convention on the Rights of the Child and the Children's and Adolescents' Code, because parents or other persons who ill-

treated children or adolescents were tried solely on the basis of the generic types of injury covered by the Penal Code. With these additions, the penalty is now more severe.

(f) Ratification by Peru of the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women, also known as the "Convention of Belém do Para" (Legislative Decision No. 26583 of 22 March 1996). This Convention was adopted by the General Assembly of the Organization of American States in June 1994.

73. In the event of a conflict between the Children's and Adolescents' Code and the Convention on the Rights of the Child, the Convention prevails because it was one of the basic regulations used for the drafting of the Code. In this connection, article 51 of the 1993 Political Constitution refers to the constitutional hierarchy, establishing that the Constitution prevails over all legal regulations; article 55 specifies that treaties signed by the Peruvian State and in force are part of national law. As such, they may therefore be invoked by any person before the relevant judicial organs.

74. As regards national provisions most conducive to the promotion of children's rights, the 1993 Peruvian Political Constitution is the general legislation of most far-reaching legal scope; the Children's and Adolescents' Code (CNA) is the special legislation; the Organic Law on the National Registry of Identity and Civil Status is the legislation supplementing the Act on Family Violence; and the Code of Civil Procedure, the Penal Code, the Code of Criminal Proceedings and the Code of Criminal Procedure supplement the Civil Code.

75. By acceding to the Undertaking of Nariño, Colombia, in 1994 and to the Agreement of Santiago in 1996, the Peruvian Government pledged to follow up the commitments made at the World Summit for Children and to incorporate social policy into the economic and social development process. In this connection, Peru made an assessment of the fulfilment of the targets for 1995 set in the 1992-1995 Plan of Action for Children; it included in the political agenda the Prioritized Strategy of Poverty Relief. It also intensified actions designed to ensure that children and adolescents are considered as legal persons.

76. In addition, just as the Constitution recognizes the fundamental rights of the person, so it also establishes mechanisms and means to guarantee their respect. Accordingly, in the event of violation of the rights recognized in the Convention on the Rights of the Child, children and adolescents have at their disposal the remedies described below.

Legislative remedies

77. In the event of violation of the rights recognized by the Convention on the Rights of the Child, several procedures exist for eliminating the violation or at least punishing those responsible. These procedures are specified in article 200 of the 1993 Peruvian Political Constitution and in the specific regulations in the CNA, the 1984 Civil Code, the 1991 Civil Code and in tne procedural arrangements outlined in the Code of Civil Procedure and the Code of Criminal Proceedings.

78. The Political Constitution in force states in article 200 that "The following are political guarantees:

- The action of habeas corpus, which may be brought to prevent the commission or omission by any authority, official or person of an act that may injure or threaten individual liberty or related constitutional rights.

- The action of amparo, which may be brought to prevent the commissicn or omission by any authority, official or person of an act that may injure or threaten other rights recognized by the Constitution. The order may not run counter to legal norms or judicial decisions emanating from regular processes."

79. The various institutions responsible for overseeing the observance and respect of children's rights include: the police forces, which have prevention programmes and intervene in situations that endanger or threaten children's rights; the Public Prosecutor's Department, which has 57 procurators' offices throughout the country specializing in the problems of families and children; the Judiciary, which is responsible for the administration of justice through its 56 family courts; the Ombudsmen for Children and Adolescents, which have 732 offices throughout the country, regulated and supervised by PROMUDEH; the People's Ombudsman; the Ministry of Justice through the 40 ex officio defence lawyers (State-appointed lawyers who charge no fees) who are specialized and assigned to the family courts and procurators' offices; and the Commission on Women's Welfare and Human Development of the Peruvian Congress.

80. In order to defend law and order and the interests of persons, particularly children and adolescents, public institutions such as the family courts specializing in criminal and guardianship cases have premises equipped for the performance of their functions. However, these premises still need to be upgraded and expanded for optimum efficiency throughout the country.

81. The Public Treasury assigns resources to each State institution, for which purpose it has an annual budget to meet its needs. These resources are supplemented by the fees charged for the conduct of judicial proceedings and by some grants or transfers from the international community.

82. Once the legislative framework had been created and the necessary guarantees provided for cases of violation of children's rights, it was necessary to formulate a national strategy in favour of children and adolescents in order to provide solutions to the problems. Under this strategy, and in accordance with the commitment made under the Convention on the Rights of the Child, at the World Summit for Children and under its poverty relief policy, Peru adopted and implemented two Plans of Action for Children. These plans were formulated on the basis of a realistic assessment of the situation. They set objectives and propose specific and clear targets to assist Peruvian children in the areas of survival, development and protection.

1992-1995 National Plan of Action for Children

83. For the formulation of this plan, the Peruvian Government set up a High-Level Commission composed of representatives of institutions in the public sector. Supreme Decree No. 090-92-PCM of November 1992 approved the National Plan of Action for Children in the Short Term (1992) and the Medium Term (1992-1995).

84. The 1992-1995 National Plan of Action for Children establishes three main objectives:

(a) Survival objectives: To reduce infant mortality from 80 per thousand live births in 1990 to 60 in 1995; to reduce mortality among children under five from 119 per thousand in 1990 to 90 in 1995; to reduce maternal mortality from 303 per 100,000 live births in 1990 to 220 in 1995; and to improve access to safe water and sewage disposal.

(b) Development objectives: To reduce levels of serious and moderate malnutrition in children under five; to provide universal basic and primary education; and to reduce adult illiteracy.

(c) Protection objectives: To improve the protection of minors in particularly difficult circumstances.

85. Most of the targets set in this plan were fulfilled or, in some cases, exceeded. In addition, the plan served as a framework for identifying the challenges to be faced in the last five years of this century.

Table III.1

Peru: fulfilment of the targets for children by 1995

Target	Benchmark	1995
Increase immunization rates to 80 % or higher	Vaccination coverage	90%
Eliminate neonatal tetanus	Vaccination coverage (WCA) Cases per thousand live births Number of cases	52% 0.15 96
Reduce deaths from measles and cases of measles	Vaccination coverage Number of deaths Number of cases	96% 0 516
Eradication of poliomyelitis	Vaccination coverage Number of cases	93% 0
Achieve 80% use of Oral Rehydration Therapy (ORT) as part of efforts to reduce diarrhoeal diseases	Correct use of ORT Appropriate treatment received at health facilities	92% 25.4%
Designation of 70 hospitals as "Mother- and child-friendly" because of their support for breast feeding	Number of hospitals certified	76
Universal salt iodation	Supply of iodinated salt	112%
Ratification of the Convention on the Rights of the Child	--	Ratified
Reduction of pneumonia cases by ensuring that 50 % of households are able to recognize early-warning signs	Percentage of mothers able to recognize early-warning signs	40%
Standardized treatment of 30 % of ARIs cases at health facilities	Percentage of cases properly treated at health facilities	39%

1996-2000 National Plan of Action for Children

86. Supreme Decree No. 003-97-PROMUDEH of 22 May 1997 approved the 1996-2000 National Plan of Action for Children (1996-2000 PNAI). This Plan is an

instrument of the Government's social policy and is part of the Prioritized Strategy of Poverty Relief and of the efforts to promote equal treatment and integration of Peruvians.

87. The 1996-2000 National Plan of Action for Children is designed to promote and fully enforce the rights of children and to contribute to the Poverty Relief Strategy. Three overall goals are established:

(a) Survival: To reduce mortality of infants under one year from 52 per thousand live births in 1994 to 34 per thousand live births in 2000; and to reduce by 25 per cent the mortality of children under five years of age, compared with 1996 rates; to reduce maternal mortality from 261 to less than 100 per 100,000 live births in 2000; and to expand access to safe water to 80 per cent and to sanitary waste disposal to 77 per cent of users.

(b) Development: To reduce by 50 per cent levels of chronic malnutrition among children under five years of age, with emphasis on children under three years of age and priority to areas of severe poverty. In addition, to reduce deficiencies in the consumption of micronutrients; achieve universal basic education; and reduce adult illiteracy, with emphasis on the reduction of female illiteracy to 7 per cent. This target was changed to 4 per cent by the Education for Development Division of the Ministry for the Advancement of Women and Human Development in the 1997-2000 National Programme of Mobilization for Integral and Innovative Literacy.

(c) Protection: To promote full observance of the rights of children and adolescents; to formulate publicity programmes on the rights of children; and to promote and implement programmes of protection for children and adolescents in a situation of social vulnerability.

88. The Plans of Action for Children mentioned above are national plans, but there are also regional plans (for example, Arequipa Regional Plan), provincial plans (for example, Cajamarca Provincial Plan, Cuzco Provincial Plan, Trujillo Provincial Plan) and district plans (for example, "El Porvenir" District Plan, Chepén District Plan).

89. In addition to the national, regional and district plans, there are specific development plans for each sector such as the National Health Plan; in recent years, multisectoral commissions have been established to formulate strategic plans. In 1996, the Commission to Combat Drug Use (CONTRADROGAS) was set up to reinforce drug control activities, support for the rehabilitation of drug addicts and replacement of the coca leaf crop. The 1997-2002 Plan of Alternative Development, Prevention and Rehabilitation was adopted. On 15 July 1997, the Judiciary established a Commission for the Rights of the Child and designated members to formulate a strategic plan for the development of efforts to promote the implementation of the Convention on the Rights of the Child.

90. Once the plans have been drawn up and approved, each government institution is responsible for their implementation in so far as the targets fall within its area of competence. For example, the institutions involved in the administration of justice will be responsible for the application and observance of the Children's and Adolescents' Code. These institutions envisage that their principal contributions will take the form of, inter alia:

- Enforcement of principles which must be observed, such as the higher interests of the child;

- Implementation of a special system of administration of justice;

- Establishment of rights and obligations for children and adolescents;

- Involvement of all members of the community, including grassroots organizations, in the protection of children and adolescents; and

- Creation of a system of guarantees in the case of minor offenders.

91. The government institutions involved in the defence of the rights of children and adolescents are:

- The Ministry for the Advancement of Women and Human Development (PROMUDEH), directly through its Division for the Welfare of Children and Adolescents. PROMUDEH is the lead agency in the national system of total care for children and adolescents. This Ministry has an Adoptions Office and an Office of the Ombudsman for Children and Adolescents, which are part of the Division for the Welfare of Children and Adolescents, a Division for the Advancement of Women, Division of Education for Development, Division of Human Development, specific projects reflecting its functions and decentralized public agencies (OPDs) such as the Family Welfare Institute (INABIF), the National Food Aid Programme (PRONAA), the Peruvian Sports Institute (IPD), the Programme of Support for Resettlement (PAR) and the People's Cooperation Office (COOPOP);

- The Ministry of Justice, through the National Administration of Justice, has people's legal advice bureaux in semi-urban areas and court-appointed defence lawyers in each of the family courts;

- The Judiciary, through the special family courts and the administration of centres for diagnosis and rehabilitation of minor offenders;

- The Public Prosecutor's Department, through the chief procurator's office and the provincial procurators' offices;

- The Ministry of Education, which is responsible for all levels of education;

- The Ministry of Health, which is responsible for health care at all health facilities;

- The Ministry of the Presidency, through the National Social Compensation and Development Fund (FONCODES), the National Institute of Education and Health Infrastructure (INFES) and the National Development Institute (INADE), as the institutions basically responsible for the provision of the necessary infrastructure such as education and health centres and sports tracks, among other

things required for the survival and development of children and adolescents; and

- The Ministry of the Interior through the police forces (delegations and the Police Division for Children and Adolescents).

92. The experience of previous years has shown the need to involve in programme and project implementation all the public and private agencies connected with the goal of the programme or project. With this aim, several inter-agency meetings and workshops have been held to establish policies of inter-agency coordination so that there is no duplication of effort or useless work. This all allows for flexibility and immediate attention to problems. Cases of ill-treatment and sexual abuse, for example, are dealt with in district networks made up of all the agencies concerned.

93. In addition to the action in favour of children and adolescents carried out by government entities within their jurisdiction, book II, article 27, of the Children's and Adolescents' Code (CNA) created the National System of Total Care for Children and Adolescents, which has become the linchpin of the entire arrangement.

94. This system is responsible for promoting the rights of children and adolescents and monitoring their observance in coordination with the other governmental and non-governmental organizations. Book II, chapter I, of the Children's and Adolescents' Code and article 27 establish that: "The National System of Total Care for Children and Adolescents sets policy at the national level and coordinates the plans, programmes and actions of the public and private agencies dealing with children and adolescents. The system is composed of all those public organizations operating at the national, regional and local levels and it will encourage the participation of private organizations and of community and grassroots organizations working for children and adolescents." Article 28 specifies: "The Governing Body is in charge of the System as its central organ. The implementation of plans and programmes and the care which it coordinates are part of the administrative machinery ...".

95. Although the Children's and Adolescents' Code (CNA) was promulgated in December 1992, the Governing Body was not established until 8 August 1995 by Act No. 26518, amended by Act No. 26596 and Act No. 26621 entitled "Act on the National System of Total Care for Children and Adolescents". The Governing Body depends for its budget on the Ministry of the Presidency but has technical, functional and administrative autonomy and is answerable to the Minister concerned. It comprises in its structure the Technical Secretariats dealing with adoptions and with monitoring and evaluation and the National Service Coordinator of the Ombudsmen for Children and Adolescents.

96. Legislative Decree No. 866 - Act on the Organization and Functions of the Ministry for the Advancement of Women and Human Development (PROMUDEH), amended by Legislative Decree No. 893 - transferred to PROMUDEH responsibility for the National System of Total Care for Children and Adolescents. The functions are located in the office of the Deputy Minister and the Division for the Welfare of Children and Adolescents is responsible for coordinating, executing, monitoring and promoting actions on behalf of children.

Follow-up machinery and actions

97. In 1991, the High-Level Commission for the formulation of the National Plan of Action for Children (PNAI) in the Short and Medium Term was established, consisting of representatives of the various sectors and headed by a representative of the President of the Republic. This Commission was entrusted with the follow-up, supervision and evaluation of PNAI during its first years.

98. Starting in 1995, this function was assumed by the Governing Body of the National System of Total Care for Children and Adolescents.12/ The Governing Body was composed of representatives of all the public and private organs and agencies as well as the grassroots community and social organizations involved in plans and programmes providing care for children and adolescents at the national, regional and local levels. The Governing Body has a Technical Monitoring and Evaluation Secretariat, which was responsible for supervising and evaluating the plans, programmes and activities providing total care to children and adolescents which are being implemented at the national level in public and private institutions, as well as in grassroots community and social organizations. It was also responsible for the Governing Body's central register of public and private institutions and grassroots community and social organizations providing services to children and adolescents. The programmes executed by these organizations are also to be recorded in the register.

99. In 1996, the System with all its functions and powers was incorporated in PROMUDEH. Among the follow-up and monitoring activities conducted in accordance with the Convention on the Rights of the Child, mention may be made of the evaluation conducted in 1995, which revealed that the targets for children set in the 1992-1995 PNAI had been met. This assessment is contained in the document entitled "Children first: Evaluation of the success in reaching the targets for children", which was disseminated at various events concerning Peruvian children held in different cities throughout the country.

100. PROMUDEH is preparing a directory of private and public agencies working for children and adolescents. A data base is being prepared which will provide information on such matters as the agencies' plans, programmes and activities, coverage and geographical scope.

101. In addition, with the aim of evaluating the application of the Convention and the progress made in reaching the targets for children, the Government in Act No. 25669 proclaimed National Children's Rights Week, as a means of promoting social mobilization and communication. This Week is observed each year from 24 to 30 September. It has been established that during the Week there will be decentralized activities such as meetings, marches and children's parliaments. The children's parliaments have met in each of the country's departments and provinces.

102. The high point of the Week is the Annual Conference on Children's Rights and the INEI presentation on the state of children, adolescents and women. The

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12/ Established by Act No. 26518 of 8 August 1995.

topics covered have included: Girls, present with a future, 1997; Child abuse, 1996; Social policies and children's rights. 1995; and Education - everyone's right, 1994.

103. The 1992-1995 PNAI also played an important role in guiding the country's social strategy, whose goals were incorporated in 1993 in the National Poverty Relief Strategy. Subsequently, the 1996-2000 PNAI became an instrument underlying the Poverty Relief Strategy currently being pursued by the Peruvian Government.

104. In addition to the National Plan of Action for Children, provincial and district plans exist as part of the world-wide initiative "Child-Friendly Mayors". Among these plans, mention may be made of the following.

105. The Cajamarca Provincial Plan, launched in March 1994, involves the participation of more than 35 agencies in the public sector, non-governmental organizations and grassroots organizations and covers the province of Cajamarca and its 12 districts. The plan includes health, education and nutrition programmes. It is run by the Village, Women and Family Round Table created by the local government. In addition, there is a municipal office which supports plan coordination and follow-up. Since 1996, other provinces and districts in the department of Cajamarca have also drawn up their own plans.

106. The Trujillo Provincial Plan, launched in February 1996, involved 46 national agencies in the public sector, non-governmental organizations and churches. It is planned to implement inter-agency programmes relating to health/nutrition, education, water and sanitation, and children's rights. The plan is supervised by an inter-agency governing board, managed by a technical committee and supported by the municipal government.

107. The Arequipa Regional Plan was formulated by the Inter-Agency Working Group for the Total Development of Children (CORITO) in 1995. The plan involves 35 agencies in the public sector, non-governmental organizations, civic and community organizations. The plan is regional in scope and includes eight provinces. It comprises programmes of health, education, recreation and culture, food and nutrition, environment and organization, children's communication and children in difficult circumstances.

108. A Commission for the Follow-Up, Supervision and Evaluation of the Plan of Action for Children has also been set up.13/ In this connection, the National Institute of Statistics and Data Processing (INEI) has undertaken a series of activities to meet the information needs generated by the World Summit for Children, in order to contribute information for the preparation of an assessment of the situation of children and to assist with follow-up and evaluation. In recent years, Peru has had access to sources of statistical information which reveal social trends and developments, particularly among the most vulnerable groups. The main sources of statistical information are the following: population and family health surveys (ENDES II conducted in 1991-1992 and ENDES III conducted in 1996); national population and housing census of 1993; national survey conducted in 1993 of the size of children in the first

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13/ Supreme Decree No. 060-93-PCM of 1993.

grade of primary education; national household surveys (quarterly, 20 households, urban and rural areas, national and regional levels), 1993-1997; 1993 school census, nation-wide and at all levels of education; and surveys of health infrastructures conducted in 1992 and 1996.

109. Some research was also conducted through INEI and with the assistance of UNICEF. Mention may be made of the statistics on childhood prepared in government agencies, the evaluation prepared for the establishment of a system of information to monitor the ten-year targets for children, 1992, and the evaluation of the ability of the Statistical Offices in the public sector, especially the social sectors, to produce information. Topics covered in the study included the availability of instruments and timing of output, staff skills and availability of staff and equipment. The evaluation showed the shortcomings in the flow of information, procedures, training and quality control in the phases of data production.

110. The state of children was also publicized through various annual publications since 1993, such as the INEI/UNICEF Compendium of Statistics on Children and Adolescents and the report on the state of children, adolescents and women. In order to obtain a clearer picture of the situation of Peruvian children, a child development index was constructed to quantify regional and departmental social differences, as well as the children's development.14/ The indicators used were:

- Households where basic needs are met. Indicates degree of vulnerability of the household where the child lives;

- Households with a television set. Indicates leisure opportunities and access to information;

- Number of years of schooling. Indicates educational level attained;

- Probability of survival to one year of age. Indicates state of health, care received by children and access to adequate services;

- Acceptable nutrition. Gives a snapshot of the child's quality of life; and

- Children who work. Indicates the possibility of overcoming poverty, since children who work are at risk of underdevelopment.

111. An index of gender equality was also constructed, in order to study departmental and provincial differences so as to influence social programmes with a gender component.15/ Use was also made of regional dossiers on health, women and population. Efforts to publicize the situation of Peruvian

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14/ Shown as a graph using an index from 0 to 100, where 0 corresponds to the department with the most problems and 100 to the department with the best level of development.

15/ These indicators were published in "State of children, adolescents and women", 1995.

children through special publications included information on the situation of women and on maternal-child health. This information was compiled by ENDES II in 1992 for each of the country's 13 regions.

Indicators concerning children and adolescents

112. For the systematic compilation of data on children and adolescents in Peru, there exists a National System of Statistics and Data Processing, for which INEI is the governing body, in accordance with Supreme Decrees Nos. 090-92-PCM and 060-93-PCM. In support of the activities of monitoring and evaluation of the 1992-1995 National Plan of Action for Children and of the 1996-2000 National Plan of Action for Children, INEI organized the Sub-System of Statistics and Social Indicators for Children, Adolescents and Women. The goal of this Sub-System is to provide continuous and updated information on developments, trends and changes in the economic, social and demographic characteristics of children and their families.

113. In this context, INEI has engaged in the following activities:

- Preparation of annual publications since 1994 showing the situation and status of children and women with regard to health, education and nutrition. On the subject of children's rights, a publication entitled "State of children, adolescents and women" has been issued since 1994, with the support of UNICEF;

- Preparation, since 1994, of the annual "Compendium of Statistics and Indicators on Childhood". This provides information in tables and graphs showing the demographic characteristics, health, education and economic situation of households and families, broken down by district, urban and rural areas and ethnic groups;

- Provision of information on the situation of the indigenous population, especially children, through the 1997 publication entitled "Peru: the Population of the Indigenous Communities of Amazonia";

- Publication on the topics dealt with at the 1997 Subregional Workshop on Social Indicators, Poverty, Women and Children;

- Compilation of sources of data, variables and social indicators on childhood. Included are data received from the Offices of Statistics and Data Processing of the Ministries of Health, Education, Interior, Justice and Labour and from public agencies and non-governmental organizations. In addition, questions concerning children are included in the household surveys and special surveys such as the population and health surveys (ENDES);

- Preparation of a relational data base of indicators on children, adolescents and women on the basis of information provided by the education, health, labour and justice sectors and by other public and private agencies. The point is to have data from various sources, with a more detailed geographical breakdown, in particular by urban and rural areas;

- Organization of the Subregional Workshop on Social Indicators, Poverty, Women and Children, designed for experts from the Andean subregion - Venezuela, Colombia, Ecuador, Bolivia and Peru. The Workshop was attended by representatives of the civil service, private agencies and non-governmental organizations;

- Establishment of the Inter-Agency Commission on the System of Social Indicators for Children, Adolescents and Women, by R.J. 205-94-INEI in July 1994. The Commission is made up of representatives of the Ministries of Health, Education and Justice and of agencies such as the Peruvian Foundation for Children, the National Family Welfare Institute (INABIF), the Social Compensation and Development Fund (FONCODES), the Peruvian National Police, the Delegation of Minors and Women, the Municipality of Lima and the National Food Institute. It also includes representatives of private agencies such as Caritas (Peru), Radda Barnen, the Centre for Information and Education for the Prevention of Drug Abuse (CEDRO), Projects of Data Processing, Health, Medicine and Agriculture (PRISMA), the Centre for Social Research and Publications (CESIP), the Andean Institute for Research on Population and Development (INANDEP) and the Nutritional Research Institute (IIN). Subsequently, PROMUDEH, as governing body of the National System of Total Care for Children and Adolescents, was included, as was INABIF which is part of the System. This Commission is a technical agency dealing with statistics, which is working to improve the output and organization of statistics and indicators concerning children, adolescents and women. As a sub-system of the National System of Statistics, this Commission will support the follow-up, monitoring and evaluation of the National Plan of Action for Children.

Promotion and dissemination of the Convention on the Rights of the Child

114. The State is engaged in various activities and programmes, through PROMUDEH and its Division for the Welfare of Children and Adolescents, as a special and coordinating agency. This Ministry works in coordination with the other sectors and with civil society (National Initiative Group for Children's Rights-GIN, Centre for Information and Education for the Prevention of Drug Abuse-CEDRO, Centre for Social Research and Publications-CESIP, Save the Children (Canada), Defence Institute-IDEIF, Episcopal Conference, Fe y Alegría, among others). Round-table meetings have been held in order to standardize the approach to matters concerning the defence of the rights and duties of children and adolescents. At these meetings, ideas can be exchanged for the benefit of the child population.

115. In the context of inter-agency coordination, the participation of grassroots social organizations, mothers' clubs and Glass of Milk Programmes is considered important for the organization of activities to benefit children, since it will ensure that promotion and prevention work is carried out by the community leaders.

116. The promotion and dissemination of the Convention on the Rights of the Child has been achieved through various media campaigns. The full text of the Convention has been distributed in publications and other activities have

included posters and brochures. Details are given below of some of the campaigns conducted between 1993 and 1997. The data provided by the campaigns should be considered as approximate.

117. Campaigns conducted in 1993: with the sponsorship of the Swedish association Radda Barnen, the official gazette El Peruano published the review Children's and Adolescents' Code. This publication was illustrated and easy to understand. Two editions were printed, each consisting of 10,000 copies, and national coverage was achieved.

118. Campaigns conducted in 1995: posters and other information material were distributed locally, including 11,000 concerning the Municipal Ombudsmen for Children and Adolescents and 6,000 on the rights of the child, with the support of UNICEF and Rädda Barnen. Mass media coverage on television: 13 interviews on the programme "Buenos Días Perú" on Channel 5, on the news bulletin of ATV Channel 9 (three interviews), on the programme "Contrapunto" on Channel 2 (two interviews), on the family programme on Channel 11 (one interview), on the first edition of the news on Channel 4 (two interviews) and on the debate programme on Channel 7. There were also reports on the opinions of children on the night news on Channels 2 and 9 and on the radio (20 presentations).

119. Campaigns conducted in 1995: 48 discussions on the Ombudsmen for Children and Adolescents with the participation of 2,551 persons; distribution of materials: 5,000 posters about the Municipal Ombudsmen for Children and Adolescents; 5,000 works by adolescents; 7,500 copies of "¿Como es? 1, 2, 3"; 2,000 copies of the directory of Municipal Ombudsmen for Children and Adolescents; 2,000 copies of the Convention on the Rights of the Child; 2,000 copies of the Children's and Adolescents' Code; 3,000 posters about the Municipal Ombudsmen for Children and Adolescents in Arequipa; and 5,000 brochures of Municipal Ombudsmen for Children and Adolescents in Trujillo. Mass media: nation-wide television coverage, radio coverage in Trujillo and Cuzco, information on the services provided by the Ombudsmen for Children and Adolescents on twenty billboards located in the main streets and avenues of the city of Lima and information on the right to a name (registration campaign) with billboards in the cities of Lima, Arequipa, Cuzco, Trujillo and Piura.

120. Campaigns conducted in 1996: information: 282 Municipal Ombudsmen received the following information material for distribution: 17,095 posters about the Municipal Ombudsmen for Children and Adolescents; 4,455 posters about the rights of children; 24,346 leaflets "¿Como es?"; 9,242 copies of the Children's and Adolescents' Code (abridged version); 2,938 copies of the Children's and Adolescents' Code (complete version); 3,000 copies of the directory of National Ombudsmen for Children and Adolescents; and 4,000 copies of the directory of Lima Ombudsmen for Children and Adolescents. Discussions in grassroots organizations in Lima and Callao, the Grau region, the Inca region, La Libertad, Lambayeque and Cajamarca, Arequipa, Puno, Moquegua and Tacna, with a total of 13,187 participants. Information visits to 338 health centres, 207 cafeterias, 397 PNP delegations, 154 churches, 797 schools in the cities of Lima, Callao, Grau region, Inca region, La Libertad, Lambayeque, Cajamarca, Arequipa, Puno, Moquegua and Tacna. Information to school children and young people provided at 13 events with the participation of 1,150 adolescents. During 1996, 14 information meetings for local authorities organized by the Municipal Ombudsmen for Children and Adolescents in the districts of Chancay, Huaral,

Barranca, Pisco, Imperial, Huamanga, Chimbote, Sihuas, Tambo, Tarapoto, Punchana, Piura and Jaén, with the participation of 384 local authorities.

121. Campaigns conducted in 1997: the Ombudsman's Office of PROMUDEH's Division for the Welfare of Children and Adolescents conducted a nation-wide campaign on the right to education, distributing 20,000 posters and 30,000 leaflets to the general population through the Ombudsmen for Children and Adolescents and the departmental offices of the Ministry of Education, at the national level; the campaign on the right to a name, distributing 60,000 posters to Ombudsmen for Children and Adolescents and municipalities throughout the nation; and the movement "Through the Voice of Adolescents" distributed 2,000 posters and 10,000 flyers. Other material distributed included 5,000 posters and 1,000 brochures on child abuse units of the Ministry of Health, 20,000 posters promoting the Ombudsmen for Children and Adolescents ("This door is always open"), 20,000 leaflets on child abuse distributed at various events, and 1,000 leaflets on "Children and sexual exploitation".

Dissemination at events and institutions

122. The rights of the child were not only publicized through campaigns such as the ones described above. In addition, during the period 1993-1997 the Ministry of Education, in agreement with Rädda Barnen, distributed various types of material on the rights of the child. The following table shows the quantity of materials distributed through the education system.

Table III.2

Peru: materials distributed by the Ministry of Education at education centres

Materials	1993	1994	1995	1996	1993-1996
Notebooks and teaching posters	40,000	55,000	78,000	120,000	293,000
Copies of the Code		25,000	5,000	5,000	35,000
Posters on the rights of the child/information sheets, children's parliament	10,000	9,385	15,000	100,000	134,385
Total material distributed	50,000	89,385	980,000	235,000	562,385

Source: Ministry of Education.

123. The universities received material at 16 events held in nine universities (Iquitos National University, San Luis Gonzaga de Ica University, five Universities in Lima, Nursing School of Loayza Hospital and Peruvian Institute of Communications and Systems), with the participation of a total of 998 students.

124. The Supreme Court of Justice and the Public Prosecutor's Department, with the support of UNICEF, organized an international seminar on "The Children's and Adolescents' Code and its New Approach", in order to publicize the rights of children. There were speakers from various countries and judges, procurators and court-appointed lawyers from all over the country participated. Through agreements with UNICEF and Radda Barnen, the national police through DIVIPOLNA

held 120 events to train members of the police force in the care and treatment of children and adolescents. The training courses covered developmental psychology, analysis of the national situation, interview and observation techniques, legislation concerning children and adolescents, teaching methods, police reports and documentation on children and adolescents, guardianship and human rights and the Constitution.

Table III.3

Peru: training courses organized by the Police Division for Children and Adolescents (DIVIPOLNA), 1992-1997

Courses	1992	1993	1994	1995	1996	1997	Total
Training	2	1	2	1	-	-	6
Non-institutional	1	1	1	1	1	-	5
Correspondence	-	-	2	2	-	3	7
Mini-courses	3	4	3	3	1	-	14
Latin American forum	-	-	-	1	-	-	1
Chats	-	-	20	25	30	-	75
Discussions	-	1	1	1	1	-	4
Workshop seminar	-	-	-	3	1	4	8
PNP members							
Officers	40	96	825	859	140	-	1,960
Junior officers	269	491	2,089	11,403	10,677	1,048	25,977

Source: DIVIPOLNA.

125. Within the Public Prosecutor's Department, the Research and Training Institute was responsible for training both administrative staff and procurators throughout the country. Since 1993, the Institute has offered the following courses: workshop on family violence and Act No. 26260, Lima (August 1995); course on the treatment of children's and adolescents' problems in Peruvian legislation, Lima (September 1995); course on Act No. 26260 on family violence, Lima (February 1996); and course on family law in Peruvian legislation, Lima (May 1997).

126. In 1992, the Ministry of Education, in collaboration with UNICEF, organized workshops in 12 education regions on the Convention on the Rights of the Child, the World Conference on Education for All and basic training needs. The aim of these two-day workshops was to promote, publicize and inform all education authorities, regions and Education Service Units (USEs) of the relevant jurisdictions about the rights of children. The nation-wide network of public early education was mobilized on behalf of children and the following goals were achieved.

127. Materials were distributed to 1,000 local authorities in order to enhance their awareness of the topic of childhood. A total of 10,000 information leaflets were provided and 10,000 manuals on the rights of children were

distributed in Quechua. The subject of the rights of children and adolescents was included in the curriculum at all levels (early, primary and secondary) in order to reach all pupils at the various levels. A non-governmental organization, the Human Rights Training Institute, prepared manuals and guides to train teachers in the rights of children and adolescents.

128. In 1993, health education and diocese groups were organized. They consisted of representatives of the Ministries of Health and Education with the participation of representatives of the Pastoral de la Infancia in the various dioceses throughout the nation and were designed to promote children's rights and support the national system of child care centres, called "Wawa Wasi" in the Quechua language. As part of the 1992-1995 National Plan of Action for Children, the Wawa Wasi project was launched nationally, with the aim of expanding the care provided to children under three years of age. This project provides a welcome solution for working mothers. It is currently the responsibility of PROMUDEH.

129. In 1994, the number of children under three years of age who were in day care increased from 1.2 to 3 per cent, because of the existence of 5,000 Wawa Wasis. These centres enable working mothers to leave their children in a safe place and also provide paid employment to women in the community who participate in the programme as maternal caregivers.

130. In 1995, the Wawa Wasi system was consolidated as a multisectoral project of the Ministries of Health, Education and the Presidency and in October 1996 the project was transferred to PROMUDEH, with a new approach. Information was provided to the community on total care for children and practices and patterns of child raising, helping to create a caring culture. The following targets were met by December 1996: 5,000 Wawa Wasis in operation, attended by 39,752 children, of whom 25,044 are under three years of age; 5,000 packages for early childhood stimulation; 5,000 basic equipment packages; 250 cafeterias for children; and 200 health facilities.

131. Other equally important activities include the Second Latin American Symposium on Family and Community Participation in the Total Care of Children under Six Years of Age. This event assembled over 1,000 Latin American experts, who found that the Wawa Wasi project was a magnificent solution for the most vulnerable children. Several parallel meetings were organized in conjunction with this symposium and were attended by members of the various professional associations, academic institutions and grassroots organizations. They provided an opportunity to inform others of the social policies adopted by Peru with regard to children's rights.

132. It should be noted that both the State and non-governmental institutions took part in the various campaigns of promotion and information about the rights of the child. In some events, non-governmental organizations and government bodies joined together in both the organization and the actual holding of the event.

133. It is noteworthy that much of what has been done for children has been a joint effort. It has been found that children themselves participate actively in the dissemination of the rights of the child, in the campaigns conducted at education centres, in essay contests on the subject or in the making of placards

illustrating their rights for use in marches. Mention must also be made of the major support provided by UNICEF and Radda Barnen in the campaigns on the rights of the child. Non-governmental organizations also collaborated.

Training in the Convention on the Rights of the Child

134. Public institutions have conducted various training courses on the rights of children. In cooperation with Radda Barnen, training was provided for staff of the following government entities:

- Ministry of Education, 1994: 20 specialists from Education Service Units (one day); 660 teachers in Education Service Units 1, 2, 6, 16 and 17 (six days); and 170 directors of education centres of Education Service Units 7, 12 and 1;

- Ministry of Education, 1995: 925 teachers from Education Service Units 3, 11, 9 and 26, from the education centre Alipio Ponce PNP, María Auxiliadora Institute, Los Angeles and other centres received training on inter alia school for parents, Ombudsmen for Children and Adolescents, prevention of violence and gangs;

- Ministry of Health, 1994; 450 participants in seven events coordinated and organized by agencies of the Ministry of Health;

- Ministry of Health, 1995: 185 participants in seminars on Ombudsmen for Children and Adolescents and child abuse;

- Members of the Peruvian National Police, 1994: 4,000 junior officers participated in refresher courses, 1,410 participants in three lectures in police districts 3 and Callao;

- Members of the Peruvian National Police, 1995: 300 attended the refresher course;

- Promoters of the rights of children in organizations, 1994: seven workshops in the districts of Carabayllo, La Victoria, Cercado, San Genaro, El Agustino and Lince, attended by 510 promoters;

- Promoters of the rights of children in organizations, 1995: one introductory workshop, seven advanced workshops and one systematization seminar, attended by 328 Ombudsmen including secigristas (law students doing post-graduate volunteer work) and law interns in the cities of Lima, Arequipa, Piura, Trujillo and Cuzco and 10,136 members of 166 grassroots organizations or education centres;

- PROMUDEH (Promoters of the rights of children in organizations), 1996: six introductory workshops attended by 314 Ombudsmen, 24 advanced workshops attended by 608 Ombudsmen and seven evaluation workshops attended by 191 Ombudsmen in the cities of Lima, Trujillo, Cuzco, Arequipa and Piura. In addition, there were ten training events for leaders and Ombudsmen in zones of direct focus in the cities of Huancayo, Chiclayo, Iquitos, Jaén, Huamanga, Chimbote,

Tarapoto, Huaura, Barranca and Huaral, covering 56 municipalities and 220 persons;

- PROMUDEH, 1997: nine workshops on interview techniques for cases of abuse, attended by 335 Ombudsmen and held in the cities of Lima, Trujillo, Tarapoco, Piura, Puno, Junín, Huaraz, Arequipa and Cuzco;

- Ministry of Justice, 1994: workshop on mediation attended by judges, procurators, court-appointed defence lawyers, lawyers from people's legal advice bureaux, Ombudsmen and members of the National Police;

- Ministry of Justice, 1996: six refresher courses for lawyers and court-appointed lawyers; and

- Universities: a workshop was organized jointly with the Mayor de San Marcos National University and attended by 100 students; six lectures on the programme of Ombudsmen for Children and Adolescents at the universities of Lima, the Mayor de San Marcos National University, Federico Villarreal, the Pontifical Catholic University of Peru, San Martín de Porres, Inca Garcilaso de la Vega, attended by 980 students.

IV. DEFINITION OF THE CHILD

135. In Peru, the Children's and Adolescents' Code (CNA) defines the child and adolescent for the various legal contexts involving the rights and duties of children and adolescents. Even in cases where regulations exist, the Code is still useful for the identification and punishment of illegal acts committed by children. This legislation contains provisions which cover inter alia the granting of authority to provide medical treatment, acceptance of employment, voluntary enlisting in the armed forces, criminal responsibility and sanctions.

136. This chapter deals with the content and application of the various definitions and descriptions of the child and the adolescent in the context of the administration of justice and of their right to health and employment.

137. The differences which exist between the definition of the child in Peruvian legislation and in the Convention on the Rights of the Child are differences of terminology rather than of substance. Article 1 of the Convention states "... a child means every human being below the age of eighteen years unless, under the law applicable to the child, majority is attained earlier" and article I of the Preliminary Title of the Children's and Adolescents' Code states "A child means every human being from the time of conception until the age of twelve and an adolescent means every person between twelve and eighteen years of age".

138. The Code uses the same upper and lower age limits as the Convention on the Rights of the Child, since article I of the Preliminary Title specifies that the child is protected from the time of conception, meaning the union of egg and sperm, according to the 1996 statement of reasons. Thus the protection to be provided by institutions starts precisely from the first instant of life; any practice altering the genetic makeup or any threat to the life of the unborn

child is prohibited. As far as the upper age limit is concerned, in Peru majority is attained at the age of eighteen; only persons who have reached that age may be tried under the system of administration of criminal justice.

139. However, as can be seen from the definition in the Code, a distinction is made, within the category of "child", between children and adolescents. This is not only in order to avoid using the world "child" to describe adolescents, who may find it pejorative, but also because this distinction permits adolescents to assume certain legal obligations. These include the obligation to respect the rights of persons; violators are brought to trial and subject to rehabilitative measures, whereas children under 12 years of age who break the law will be subject to protective measures.

140. The distinction also serves to differentiate certain rights under the law, such as the right of children and adolescents to join associations, whereas only adolescents may form associations, and respect for the opinion of children and adolescents. In other situations, the rights of children and adolescents in Peru exist on an equal footing.

Minimum ages established by law

141. The minimum ages established by Peruvian legislation vary as follows, depending on the context:

(a) Medical treatment: The legislation does not specify a minimum age established by law for medical treatment or surgery without parental consent. Generally children and adolescents may visit any health centre for advice on simple medical problems; however, in cases where treatment or, in particular, surgery is required, the consent of parents or proxies is required. This is why medical histories are always accompanied by a page containing the signed permission of the persons responsible for the child or adolescent.

If the child or adolescent has no parents or proxies - in other words, if he or she may be in a state of abandonment and requires treatment or emergency surgery - the competent family procurator will be informed immediately and may give permission in an emergency. Otherwise, a written communication on the situation of the child or adolescent will be sent to the family court, accompanied by a social report and indicating the absence of relatives and the patient's state of health; the judge will decide whether or not the treatment or surgery should take place.

(b) Acceptance of employment or work: Article 54 of CNA expressly establishes that the minimum age for authorization to work is 12 and, in the case of dangerous activities, 14, 15 or 16 depending on the activity and amount of danger involved.

(c) Part-time employment and full-time employment: Article 59 of CNA establishes work days of four and six hours and article 60 of the Code prohibits night work unless exceptional permission has been given by the judge and limits it to four hours a day. Thus in Peru the law does not permit full-time work by adolescents. However, the social situation has only recently begun to conform to the regulations, because it is very difficult to change attitudes and uproot traditions. This attitudinal change is the goal sought by the Government and by

non-governmental institutions in their campaigns to make the community aware of children's rights. At the same time, there are programmes to discourage child labour and to protect the labour of adolescents.

(d) Voluntary enlistment in the armed forces: Adolescents may volunteer after they have attained 16 years of age, provided that they meet the prerequisites (complete five years of secondary education, have authorization from parents or guardians and pass the psychological aptitude test (art. 106 of Supreme Decree No. 072-84-PCM).

(e) Recruitment to the armed forces: Enrolment for military service is compulsory at the age of 17; actual military service is performed as of the age of 18.

(f) Criminal liability: In Peru, criminal liability is acquired at the age of 18. Juveniles under 18 and over 12 are not liable to prosecution but possess criminal liability. This means that adolescents (over 12 but under 18) bear different criminal liability from that of adults for the consequences of their actions; if their actions are categorized as being unlawful and blameworthy, they give rise to what is called a crime, misdemeanor or felony. While the criminal laws are the point of reference both for adults and for persons under 18 years of age, the concept of liability differs substantially in so far as liability to prosecution is concerned. The three basic differences concern: procedures; duration and type of punishment, which for adults differ from the duration and type of rehabilitative measures applied to adolescents; and physical location where the measure is imposed.

142. Children under 12 are not liable to prosecution and do not possess criminal liability. A child under 12 years of age who commits a punishable act (if duly proven) should be the subject not of a rehabilitative measure but of a protective measure. If the same act is committed by an adolescent, it may constitute a criminal offence.

143. Decree Law No. 25564, promulgated on 20 July 1992, lowered to 15 the age of liability to prosecution for crimes of terrorism. This provision was enacted because of the political situation caused by terrorism in Peru and was designed to prevent terrorists from using adolescents who would not be liable to prosecution.

144. Once the terrorism crisis had ended in Peru, Act No. 26447 specified that adolescents are no longer liable to prosecution. Thus only persons aged 18 and over are now liable.

145. Nevertheless, Peruvian legislation provides a special system for adolescent offenders, who may be tried when they break the law, subject to their rights and guarantees established in the Convention. The law specifies that cases involving children or adolescents shall be treated as human problems. When the offender is found to be a minor, judicial proceedings are halted in a "suspension of action" and the case is remanded to the competent family procurator.

146. Deprivation of liberty: With regard to adolescents who have broken the law, the Children's and Adolescents' Code establishes that rehabilitative

measures shall be applied. One of the rehabilitative measures listed in the Code is placement. This is a custodial measure, which is imposed as a last resort and for the shortest period necessary. This period may not exceed three years. The measure is imposed only in the cases specified by law.

"Article 251. Placement shall be ordered only when adolescents:

(a) Have committed wilful misconduct defined in the Code, for which a penalty of more than four years is prescribed;

(b) Repeatedly commit other serious offences;

(c) Repeatedly fail, without good reason, to submit to the rehabilitative measure imposed previously."

147. Both children and adolescents may be placed in social welfare or health facilities, where they are given total care. They may be placed in such facilities only by a court order. In such cases, the judge shall institute a protection investigation with a view to sending the child or adolescent home where possible.

148. Capital punishment and life imprisonment: Capital punishment and life imprisonment currently do not exist in Peru as a rehabilitative measure for adolescents. Act No. 25475, which lowered the age at which adolescents may be tried as adults, was repealed by Act No. 26447, which entered into force in October the same year. Article 140 of the Peruvian Political Constitution provides for capital punishment only for adults who betray their country in a situation of war or terrorism.

149. Testimony in court: Except in specific cases, there is no minimum age for testifying in court criminal tribunals, courts, supreme procurators' offices and provincial procurators' offices). Children and adolescents may give testimony in family cases. In practice, such testimony is given by children aged eight or over. In criminal cases, they are called to testify only when they have been injured or were witnesses and they must be accompanied by their parents or persons responsible for them.

150. Submission of complaints: Children and adolescents are not always allowed to submit complaints, for instance in cases where a third party is affected by an injurious act. However, in cases where the child or adolescent is the injured party, the police authority initiates an investigation with the participation of the provincial procurator for criminal cases. Similarly, in practice and in application of article 168 of the Children's and Adolescents' Code and of article 19 of the Convention on the Rights of the Child, children and adolescents may submit complaints of ill-treatment by relatives, including parents, or by third parties to the Public Prosecutor's Department, family procurator. An investigation is conducted, in which children or adolescents do not have to be accompanied by an adult (father, mother, sibling, uncle , etc.) so that their version will be credible. In addition, children and adolescents may submit complaints themselves to the Ombudsmen for Children and Adolescents who, after an investigation has been conducted, will refer the cases to the appropriate organ.

151. Participation in administrative or judicial proceedings: A fetus, child or adolescent may be a party to proceedings. However, they participate in judicial proceedings through their legal representatives (parents or responsible persons). In other words, with regard to the submission of a petition, children and adolescents may petition without any formalities when any of their rights have been violated, except in the case of adolescent offenders. However, this does not prevent them from expressing their opinion regarding cases which affect them and their opinion must be taken into account.

Relationship between compulsory school attendance and minimum age for employment

152. Compulsory schooling in Peru includes early, primary and secondary education, all of which are guaranteed by the State. The age of completion of compulsory schooling is between 6 and 18.

153. As stated above, there are legal regulations governing work by adolescents between the ages of 12 and 18. Since these ages include the period of obligatory schooling, article 19 of the Children's and Adolescents' Code establishes that: "The State guarantees the provision of special school arrangements and schedules to permit regular attendance by children and adolescents who work ...". It also indicates that it is the responsibility of the directors of education centres to ensure that work does not affect performance or school attendance; they are obliged to report regularly on the performance and attendance of students who work.

154. Indeed, one of the requirements for issuing a work authorization for an adolescent is that the work must not affect regular attendance at school (CNA art. 57). In addition, persons who employ adolescents (either in regular work or as an unpaid domestic or family worker) are obliged to make arrangements for their regular school attendance.

155. The statistics show that both drop-out rates and academic backwardness are due more to demographic and cultural variables than to the existence of basic needs or to work by children and adolescents as such.

156. Because children under 12 are working, some for more hours than are permitted by law, PROMUDEH, through the National Family Welfare Institute (INABIF) and the non-governmental organizations, has programmes designed to prevent children from being involved in the labour market at too young an age and to discourage child labour, as well as to protect the labour of adolescents and prevent their exploitation.

157. Under the memorandum of understanding between the Government of Peru and ILO, signed on 31 July 1996, PROMUDEH approved the establishment of the National Executive Committee for the gradual elimination of child labour. This Committee is composed of representatives of PROMUDEH (one from the Division for the Welfare of Children and Adolescents and one from INABIF) and of the Ministries of Labour and Social Welfare, Education and Health, of the Peruvian National Police, of the International Labour Organization, of UNICEF, of INEI, of the National Confederation of Private Business Institutions and of workers' organizations. The main task of this Committee is to define the nature and scope of the strategies and actions to be pursued in Peru, in accordance with the International Programme on the Elimination of Child Labour.

Puberty as a criterion of criminal law

158. Article 207 of the Children's and Adolescents' Code states that an adolescent offender is an adolescent who commits or participates in a punishable action defined as an offence or misdemeanor in criminal law. Adolescent offenders are tried in family courts with respect for the principles laid down in the Convention on the Rights of the Child and in the Code. It should be noted that male and female adolescents are tried in the same manner without any kind of distinction.

V. GENERAL PRINCIPLES

159. The principles of the Peruvian Political Constitution are in line with those established by the Convention on the Rights of the Child. In particular the principle of the "best interests of the child" is recognized in instruments such as the Children's and Adolescents' Code and the regulations governing the adoption of minors. In addition, government institutions with various complementary functions have been drawn into the sphere of the defence and protection of children and are doing important work of dissemination and training to promote the better administration of justice and defence of Peruvian children.

160. This chapter describes the legal instruments which embody the principles established by the Convention on the Rights of the Child. It also gives a brief analysis of the problems encountered in enforcing the principle of the best interests of the child, in incorporating this topic in the curricula of university law studies, in applying this principle in the administration of justice and in developing prevention programmes.

A. Non-discrimination

161. The principle of non-discrimination is observed in Peru not only because of the provisions of the Convention on the Rights of the Child but also because it is embodied in the current Peruvian Political Constitution, which states in article 2, paragraph 2:

> "Article 2. Every person has the right:
>
> 2. To equality before the law. No one may be discriminated against on account of origin, race, gender, language, religion, opinion, economic condition or any other condition."

162. Similarly, article IV of the Preliminary Title of the Children's and Adolescents' Code establishes that all children and adolescents living in Peruvian territory, without distinction on account of race, colour, gender, language, religion, political opinion, nationality, social origin, economic status, ethnic origin, physical or mental disability, etc., are covered by this special legislation.

163. The 1993 Political Constitution and the Children's and Adolescents' Code proclaim the equality of persons: in other words, there is no discrimination

de jure. The de facto situation has recently begun to reflect this fact and the authorities are assuming their role as entities responsible for enforcing the law.

164. There have been cases in which children and/or adolescents are removed from school without justification, for example because their parents cannot pay the enrolment fees or the dues of the Parents' Association, in State schools. In such cases, the Ombudsmen for Children and Adolescents and the family procurators intervene, arranging for the child to be enrolled immediately and informing the Administrative Office of the Ministry of Education. In the case of private schools, in similar situations arising from non-payment of fees, evaluation of the child has been guaranteed and the parents have also been urged to fulfil their obligations.

165. There is also the problem of pregnant teenagers, who are often removed from school. The argument used is that the law does not allow adolescents to attend school in that condition or that harm would be done to the other girls, who might be tempted to follow their example. The Ministry of Education has rejected these arguments and has programmes to raise awareness among authorities, parents and school children in general. This position is reinforced with courses on sexuality and responsible parenthood and these topics have been included in curricula with the aim of preventing unwanted pregnancies.

166. There are currently 732 Ombudsmen for Children and Adolescents and the goal is to reach 1,200 by the year 2000. The Ombudsmen, a branch of the System of Total Care for Children and Adolescents, function in the local municipalities, public and private institutions and organizations of civil society and report to the Division for the Welfare of Children and Adolescents of PROMUDEH. Their purpose is to protect the rights granted by law to children and adolescents. They are community-based units which provide the necessary information, advice and assistance whenever these rights are violated in any way.

167. Although it is true that Peruvian legislation proclaims the equality of all human beings and rejects any type of discrimination, it would be wrong to say that discrimination does not exist in Peru. There are often instances of ill-treatment based on prejudices regarding ethnic origin, skin colour, customs, beliefs, gender and age. Discrimination is like a mantle which envelops everyone to a greater or lesser degree, often without a clear realization of what is happening. The discrimination which accompanies these prejudices is sometimes concealed and at other times more open and unveiled and the principal victims are usually children, particularly girls, in flagrant violation of their rights.

168. The fight against discrimination is being waged on various fronts, and educational levels are being promoted and improved. Non-governmental organizations involved in these activities include the "Posada de Amor" Cultural Association, the Mission "San Andrés" Association, the Association for the Education and Rehabilitation of the Blind, the Association for Special Children's Rehabilitation, the Ann Sullivan Multipurpose Centre for Special Education, the Peruvian Centre for Promotion and Education of the Disabled (CEPREDP), the Codel Club and the Institute for Child Rehabilitation ARIE and

Yancanahuasi. These organizations are working with disabled children to integrate them into society.

169. Discrimination against girls, which is most noticeable in Peru in the rural areas, where illiteracy is more widespread among women than among men, was one factor behind the establishment of PROMUDEH. This Ministry, in coordination with other governmental and non-governmental bodies, has started gender sensitivity training in various government institutions.

170. National Children's Rights Week has been celebrated for about four years. The organizing committee is composed of governmental and non-governmental agencies. Each year one topic is chosen to sensitize the population to the rights of children. In 1994, the Week was dedicated to non-discrimination, with the motto "Diversity with Equity and Equality of Opportunity". In 1997, as part of the celebrations for the Week, the fourth Annual Conference on the Rights of Children was held with the theme "Girls: present for the future".

171. In addition, with the aim of reversing the gender inequality existing among children, the Division for the Welfare of Children and Adolescents of PROMUDEH is working on the National Plan for Girls, with the aim of promoting policies geared to the exercise of the rights of girls, involving a three-pronged approach: education, because of its catalytic effect on the human development of girls; prevention of and information on violence, since girls are the main victims, particularly of sexual violence; and focus on domestic work, because this frequently limits opportunities for study.

B. The best interests of the child

172. Although the Constitution does not specifically mention "the best interests of the child", it contains appropriate provisions for their protection, such as the following

Article 1. Provides for the primacy of the person.

Article 2. Recognizes the right of every person to life, to an identity, to moral, spiritual and physical integrity and to unrestricted development and well-being, including the fetus as a legal person.

Article 4. Specifies that children, adolescents, mothers and old people are entitled to special protection from the community and the State.

Article 6. Establishes the duty of parents to feed, educate and provide security to their children and prohibits any mention of the nature of filiation.

173. Article 8 of the Children's and Adolescents' Code embodies this principle in the following wording: "In any measure concerning children and adolescents which may be adopted by the State through the Executive, Legislative and Judicial Power, the Public Prosecutor's Department, the regional administrations, local administrations and its other institutions, as well as in the action of society, attention shall be paid to the best interests of the child and respect for the child's rights."

174. The campaigns to create awareness of children's rights and to train judges, lawyers and officials involved in the administration of justice for children and adolescents and the principle of "the best interests of the child" incorporate special judicial precedent, either criminal/civil or civil, as revealed by the review of the implementation of the Convention on the Rights of the Child which was conducted by the Commission on Children's Rights of the Judiciary.

175. In lawsuits, the judge makes his ruling in the light primarily of what is best for the child or adolescent. He then evaluates the interest of the parents or responsible persons, taking into account the age, sex, opinion (depending on the minor's age and powers of judgement), the amount of time spent with one of the parents or with relatives or responsible persons and the conditions most conducive to the minor's psychological and emotional development.

176. The best age for interviewing children in the judge's chambers or in the judicial courts is eight or above, since younger children are generally unable to form their own opinions. Any judicial ruling must take into account the provisions of article 9 of the Children's and Adolescents' Code which establishes that all children and adolescents have the right to live, grow and develop within their family. The same article states that, if the parents do not give the child or adolescent the care and protection needed for normal development, they are undermining his or her physical and/or moral integrity. The judge must decide what measures are necessary to protect the minor and may entrust responsibility to another member of the family or another suitable person, as specified in article 88 of the Code.

177. Article 340 of the Civil Code establishes that, in cases of separation or divorce for cause, custody of the children is given to the spouse in whose favour the separation or divorce is pronounced. However, for their well-being, the judge may decide that custody of some or all of the children should be given to the other spouse or, if there are serious grounds for doing so, to a third party. Finally, therefore, the judge must decide in the light of what is best for the children.

178. Family procurators also have the best interests of the child at heart and must, for instance, in child support cases establish adequate support for the child's needs, which in cases of separation and divorce include adequate support for offspring. In custody cases, custody is always awarded after seeking the child's opinion and visiting rights are established in a manner which does not prejudice the child's access to schooling. Visiting rights are always dependent on fulfilment of the child support obligation. In addition, judgements and opinions from the members of the Public Prosecutor's Department promote the best interests of the child.

Importance attached to the best interests of the child

179. The principle of the best interests of the child is also observed in adoptions, since adoption is always considered as benefiting the child, as a human being with the right to grow up in a family. In other words, a family is found for a child; a child is not found for a family.

180. In the administration of special justice, the best interests of the child are ever-present in the actual legislative texts; judges are given the necessary means to resolve conflicts involving minors with speed and appropriate guarantees. For example, the judge is empowered and obliged to resolve cases of provisional custody within 24 hours, in all cases where the child is under three years of age or his or her physical integrity is endangered.

181. In the administration of justice in cases of adolescent offenders, in accordance with the best interests of the child, one option is dismissal of the case. This is a legal concept whereby adolescent offenders are permanently removed from the proceedings.

182. Placement and care of children in institutions is a measure adopted only as a last resort and as a means of protecting abandoned or orphaned children and adolescents. The aim is to protect their physical and moral integrity, by placing them in institutions where they receive total care.

Measures adopted to ensure that children receive the protection and care necessary for their well-being

183. From the legislative viewpoint, the Peruvian Political Constitution and the Children's and Adolescents' Code consider children as legal persons and articles 1 to 25 of book I of the Code specify the rights, duties and freedoms of the child, which are guaranteed by the State. In addition, the increased awareness of problems such as sexual abuse and child abuse is reflected in the changes introduced in criminal law on these subjects: Act No. 26770 of 11 April 1997 amends article 178 and Act No. 26788 of 15 May 1997 amends articles 121 and 122 of the Criminal Code.

184. From the administrative viewpoint, social policies of inter-agency coordination and cooperation are pursued and there are action plans for the joint solution of social problems such as inappropriate child labour, drug abuse and discrimination against girls.

185. As a unit of PROMUDEH, INABIF engages in various activities for the benefit of Peruvian children, designed to strengthen the family, to promote the creation and improvement of physical and psychological conditions and to ensure the total development of the child through systems of prevention, protection and training. The aim is to achieve social development, promote community involvement, help the poor and encourage self-help activities. It is also to provide care and protection to children who work and to street children, though activities using non-traditional methods; to reduce the risks threatening the child's all-round education, strengthening family and social ties; and to promote children as legal persons with the potential to be the agents of their own advancement.

186. There are 277 non-governmental organizations registered in the directory of PROMUDEH's Division for the Welfare of Children and Adolescents. They have different areas of activity, such as the administration of hostels, education, nutrition, general health and rehabilitative activities.

Problems in the application of the principle of the best interests of the child

187. Among the problems which exist with regard to the application of the principle of the best interests of the child, mention may be made of the following: misinterpretations of what constitute the best interests of the child, mainly due to the lack of skills and special training of certain persons applying the law; lack of the necessary infrastructure to guarantee appropriate conditions for children deprived of a family environment; lack of a suitable infrastructure to facilitate the presence of the authorities responsible for the protection of children; and the attitude of the community and of certain authorities which assume that an adolescent offender who has been tried or punished is a "miniature adult offender".

Vocational training on the subject of the Convention on the Rights of the Child

188. Future professionals who think they may want to work with children and adolescents acquire basic knowledge at university. Law students attend a course on child and adolescent law which devotes considerable attention to the Convention on the Rights of the Child. Similarly, students in their last year who wish to work in this branch of the law may do their post-graduate community service (SECIGRA) with government bodies such as family courts and procurators' offices, PROMUDEH and the Ministry of Labour.

189. Attention is also given to the rights of the child in the other faculties of social sciences and health sciences and courses are given on childhood and adolescence and on the principles embodied in the Convention, so that future professionals in this area are able to identify, intervene and provide the necessary support when the rights of children or adolescents are threatened. Upon completing their studies, these future professionals maybe given internships at schools, health centres and other child protection entities.

C. The right to life, survival and development

190. Article 2, paragraph 1, of the Peruvian Political Constitution and articles III, VIII and IX of the Preliminary Title and articles 1, 2 and 3 of the Children's and Adolescents' Code guarantee the right to life, integrity, survival and development of children and adolescents.

191. In a desire to protect these rights and after a review of the situation of children, Peru formulated the first National Short-Term and Medium-Term Plan of Action for Children, 1992-1995. The main objectives were to reduce infant and maternal mortality and to improve access to safe water. A review of progress under this Plan conducted in 1995 showed that most of the goals had been met. There had been a significant reduction in mortality among children under one year of age, as a result of the campaigns waged by the Ministry of Health with UNICEF assistance and involving mass vaccination, treatment of acute respiratory infections (efforts to reduce pneumonia) and prevention of diarrhoea and cholera. These campaigns were publicized by the media so that the population, and mothers in particular, would be better able to identify symptoms of pneumonia, capable of providing first aid for diarrhoea and able to go to the nearest health centre in order to obtain timely treatment for sick children.

192. The 1996-2000 National Plan of Action for Children has now been launched and has set specific intervention goals to permit attainment of the objectives. This plan comprises five inter-agency programmes: health; food and nutrition; education; water and sanitation; and welfare and protection of children and adolescents.

193. These five programmes are part of the State's poverty relief action and all contribute directly or indirectly to the protection of the life and survival of children, giving priority to groups in a state of vulnerability, particularly children under five years of age, pregnant women and nursing mothers.

Administration of justice

194. Any decisions by judges or any other authority must take into account the provisions of the Constitution and the Children's and Adolescents' Code, placing the best interests of the child above the interests or beliefs of the parents or responsible persons and approaching any problem involving children or adolescents as a human problem, even if this means departing from the literal text of a legal norm which may be applicable.

195. Let us take as an example the case of a mother who requests permission from a judge for her minor daughter to undergo surgery to correct a congenital problem which prevents her from walking normally. For religious reasons, the father does not permit blood transfusions and utterly refuses to give his consent to the operation. Bearing in mind the best interests of the child and the protective function of the jurisdictional organ, a decision was issued authorizing the surgery and, if necessary, blood transfusion. The point was to protect the girl's life and physical integrity even against the wishes of her progenitor. Such cases frequently arise, because of the existence of certain religious groupings whose members do not allow their children to undergo transfusions or surgery.

196. Abortion is classified as an offence under penal legislation. Unfortunately, it is becoming more frequent at all levels of society. Those who can afford to do so obtain abortions at private clinics and those who cannot use abortionists or unskilled persons, with serious risks to their health. In both cases, the services are performed secretly.

197. A large percentage of teenage mothers do not have the security of an environment conducive to the upbringing of their babies; maternal and child care hospitals report daily cases of teenage mothers separated from their families. Since many of them are in common law marriages, a follow-up investigation is opened in each case and, if necessary, the teenagers are admitted to maternal and child protection facilities.

198. With regard to the right of children to development, reflected in their physical, mental, moral, psychological and social evolution in a manner compatible with human dignity, the situation differs widely in the country's various departments. Few cases of violation of this right have been brought to court.

Prevention of risks arising from juvenile violence

199. In accordance with the provisions of the Children's and Adolescents' Code, the national police has social prevention programmes with the following objectives: to combat violence in the neighbourhood and at school; to prevent the exploitation of street children and adolescents who work; and to reinsert street children into schools and the community.

200. With the emergence of warring gangs, juvenile violence is causing constant damage to persons (deaths, injuries) and to property. The destructive consequences of this violence affected bystanders, particularly between 1993 and 1995.

201. Several measures were adopted to deal with this situation. One example was the action taken by the police precinct of El Agustino, a district of Lima which is very dangerous because of the presence of a large number of juvenile gangs. This precinct implemented a project for the prevention and eradication of juvenile violence, in coordination with the local political authorities and multisectoral agencies. This project started by identifying the types of gang existing in the district.

202. School gangs consisting of 20 to 30 students from the José Carlos Mariátegui, Husares de Junín and César Vallejo schools hold street brawls around their schools and in adjacent streets.

203. Hooligan supporters of the Alianza Lima, Sporting Cristal and Universitario football clubs, who brawl before and after football matches. These groups generally come from marginalized urban areas in the El Agustino district; they are drunk when they enter the sports stadium and armed with sticks, iron bars, knives, drills, crowbars, etc.

204. Neighbourhood gangs in marginalized urban districts are composed of adolescents and young people with no money and nothing to do, who are bored and form groups of 60 to 100 youths with a leader.

205. Once the gangs had been identified and classified, the groups were contacted and reached through programmes of recreation (outings to the beach), education (preventive discussions on use of free time, self-esteem, drugs, sexuality, juvenile violence, etc.) and sports (football championships), in coordination with the municipal authorities in the district. These events are still being held throughout the day on Saturdays.

206. These juvenile groups or gangs have now been persuaded to form an El Agustino Youth Association, composed of approximately 22 groups which meet to engage in activities leading to the creation of small businesses which can provide work for their members. The Police Division for Children and Adolescents was given the responsibility of supervising and evaluating the attainment of the goals and objectives.

207. Lastly, in coordination with PROMUDEH and other agencies, programmes of mobilization and guidance known as "Mobilization through the voice of adolescents, 1997" were implemented in several districts of Lima: San Borja, San Juan de Lurigancho, El Agustino, Villa El Salvador and Jesús María. Three

activities are involved: district fairs, where information and guidance are provided to adolescents, were attended by 2,500 persons including 1,550 adolescents; inter-district contest involving physical, musical and debating skills on a radio programme, in which 480 adolescents and a total of 900 participants and attendees were involved; and an artistic and cultural festival with Peruvian performers, at which prizes were awarded to the winning groups from the inter-district contest and which was attended by 3,000 adolescents.

D. Respect for the opinion of the child

208. Decree Law No. 26102 embodied in several articles the right of children to express their opinion.

> "Article 11. Children and adolescents who are able to form their own views shall have the right freely to express their opinion in all matters affecting them by any means they may choose and the right to have their opinions taken into account, depending on their age and maturity.
>
> "Article 93. The special judge shall listen to the opinion of children and take into account the opinion of adolescents."

209. Although articles 239 and 242 do not specifically mention the opinion of the child, they do establish that the adolescent must be consulted before a case can be dismissed. The same requirement is specified for the application of rehabilitative measures.

210. In 1994, a campaign was initiated throughout the education sector of taking children's opinion into account in school activities. This means that pupils should have an opportunity to share the running of their school with adults. Schools use various strategies to involve pupils democratically through nation-wide programmes.

211. Children's parliaments are developed in stages: first in the classrooms, then at the provincial and regional levels and finally at a national parliament. These parliaments have been organized since 1992 with the participation of children and adolescents.

212. The children's parliaments provide a useful outlet for children and adolescents to express their feelings. They have led to the establishment of children's committees in several places, whose aim is to promote the rights of children and adolescents and to encourage civil society to support their activities. Other outlets where children and adolescents are able to express their opinions are student governments, class committees, school police and girl guide troops.

213. Another outlet of expression is the school reporters programme organized by the newspaper El Comercio, in which children and adolescents can write articles on cultural topics and on themselves and can say what they think should be the focus of attention by the Government, the school or society in general.

214. The non-governmental organization Radda Barnen publishes a monthly bulletin entitled "National survey: voices of the future, opinions of children

and adolescents" based on surveys of current problems in Lima and some of the provinces involving adolescents between 11 and 17 years of age.

215. The Division for the Welfare of Children and Adolescents of PROMUDEH (together with UNICEF and the Scouts Association) is coordinating activities designed to provide information and expression outlets for adolescents, and to link them with their local services, by means of "Mobilization through the voice of adolescents". In addition, this Division is providing opportunities for adolescents to participate in training and discussions on topics relating to comprehensive prevention of drug abuse. In this context, various training workshops have been organized with the support of international organizations such as the Inter-American Children's Institute (ICI/OAS), the Inter-American Commission for the Control of Drug Abuse (ICCDA/OAS), the Narcotics Affairs Section (NAS) of the United States Embassy and various Peruvian non-governmental organizations.

216. As part of a project involving teenage leaders opposed to drug use, a coalition has been formed of institutions for adolescents which are interested in exploring the topic of drug use prevention to create a "Network of Teenage Leaders", initially consisting of 130 adolescents representing 35 organizations in metropolitan Lima.

217. The school Ombudsmen are working in schools with the student governments, with the participation of children and adolescents, to pinpoint needs and possible solutions to their problems within and outside the educational community; murals of various types are encouraged, as a means for children and adolescents to voice their concerns.

218. In the administration of justice, this principle of respect for the opinion of the child is observed both in judicial proceedings and in administrative proceedings. The opinion of children is ascertained through interviews.

219. Article 378, paragraph 4, of the Civil Code, which supplements article 131 of the Children's and Adolescents' Code, establishes that children aged ten or over must give their consent to adoption; consequently, children of that age participate in adoption proceedings concerning them and must give their consent to a change of name.

220. However, in institutions or other care centres where children and adolescents are placed, the opinion of the child is rarely sought. This is not through lack of willingness to do so, but because most children are reluctant to be placed and because placement is a measure of last resort, used if the child is not able to return home or if there is no relative to care for the child.

The opinion of children in civil proceedings

221. All civil proceedings, such as those concerning custody, parental authority, visiting schedules, etc., are conducted with the participation of the parties concerned and particularly children and adolescents who will be affected by the ruling to be given. Article 93 of the Children's and Adolescents' Code obliges the special judge to hear the opinion of children and to take into account the opinion of adolescents.

222. In custody proceedings brought by one parent against the other, if the child or adolescent whose custody is in dispute lives with a relative other than the parents, the judge must, in addition to hearing the opinion of the child or adolescent, listen to the persons with whom the minor lives so as best to resolve the situation. In addition, a social report is required involving a visit not only to the parents' domicile but also to the domicile of the person(s) with whom the child or adolescent is living.

223. Even in undisputed cases, the judge must hear the opinion of the child or adolescent who will be affected by the ruling. For example, in the case of adoption of a child aged ten (art. 378, para. 4, of the Civil Code), the child must consent; in proceedings involving the transfer of property owned by an adolescent who has reached the age of 16, the judge must hear the adolescent before authorizing the transfer (art. 449 of the Civil Code).

224. At the administrative level, complaints are lodged by the Ombudsmen for Children and Adolescents. As administrative entities, they always take the child's opinion into account, in complaints of violation of rights or in efforts to mediate on the child's behalf, in accordance with articles 45 et seq. of the Children's and Adolescents' Code.

Opinion of children and adolescents in proceedings concerning protective care

225. In proceedings concerning protective care, the opinion of the child is ascertained through interviews or statements as part of the protection investigation. In judicial practice, there is a constant effort to ascertain the wishes of the protected person, not only at the beginning of the proceedings but also when any changes are subsequently requested in the protective measure.

226. In all proceedings concerning protective care, the opinion of the child or adolescent is sought at the following stages: when the protection investigation is instituted and submitted to the court; when the protective measure is decided; when a change in the measure is considered necessary; when it is assumed that an unlawful act has been committed which injures the child or adolescent; when parents or relatives who had disappeared are located; when evaluation or therapy has been ordered by the court; when inappropriate behaviour or rebelliousness are found to be present; when a request is made by a teenage mother who is to be separated from her minor child; when adoption is being recommended, if the child is old enough to express an opinion; and when street children do not want to return to their homes or go into an institution.

The opinion of adolescents in offences under the criminal law

227. As a guarantee of due process, the Children's and Adolescents' Code provides that adolescents must be heard in proceedings brought against them, starting at the stage of the police investigation in the presence of their parents. Provision is made for obtaining legal advice, so that the adolescent's opinion can be expressed without any pressure and with respect for the right to presumption of innocence before the representative of the Public Prosecutor's Department and the judge, in accordance with the provisions of article 220 of the Children's and Adolescents' Code.

228. Adolescents who cannot afford to engage a lawyer for the duration of the proceedings are given a court-appointed defence lawyer without charge, who advises them and accompanies them in all formalities. During hearings to clarify the facts, adolescents have an opportunity to speak and, lastly, they may conduct their own defence orally, so that the judge can ascertain the facts.

229. For the preparation of this report, a survey was sent to judges responsible for the administration of justice in cases involving children and adolescents and the following responses were obtained. The percentage of judges who took into account the opinion of the child in all proceedings was as follows: special courts, 73.3 per cent; civil courts hearing family cases, 50 per cent; and criminal/civil courts, 60 per cent. In the specific case of criminal proceedings, the percentages were: special courts, 16.7 per cent and criminal/civil courts, 8.7 per cent.

230. The right of adolescents to have their opinion taken into account throughout the proceedings is a specific guarantee provided in defence of their rights. The judge will take into account the adolescent's personal circumstances when deciding on the appropriate rehabilitative measure. If the rehabilitative measure is placement, adolescents have the possibility of exercising their right to an interview with the judge. Ideally, judges should make regular visits to juvenile centres.

231. When the judges were questioned on the subject, it transpired that in special courts 24.6 per cent of the judges visited once a month and 8.8 per cent never visited. In criminal/civil courts, 12.4 per cent of the judges visited and 19.5 per cent never visited.

232. It can thus be seen that not many courts organized regular visits to juvenile centres. This information should be correlated with the number of complaints received by the courts each month from adolescent offenders in placement.

233. No complaints were received by 61.5 per cent of the special courts and 66.4 per cent of the criminal/civil courts. This shows the importance of regular visits to the centres by judges, since such visits enable them to approach and communicate with the adolescents so as to ascertain their needs.

Studies on the Convention in faculties and vocational schools

234. At faculties and vocational schools working with children and adolescents, studies are carried out of the rights of children and adolescents within the sphere of activity of each institution. For example, in faculties of law at Peruvian universities, there is a course on minors' rights and a course on human rights, in which the Universal Declaration of Human Rights, the Convention on the Rights of the Child and the Children's and Adolescents' Code, inter alia, are studied.

235. It should be noted that at most universities these courses are elective and not compulsory, so that not all students in the faculty study these legal instruments. This is because the law is a very broad subject and law students choose their courses on the basis of their abilities and their area of future professional interest.

236. In faculties of medicine and medical institutions, the number and content of courses on the Convention on the Rights of the Child vary. For example, the Mayor de San Marcos National University has only one course entitled "Behavioural sciences applied to human behaviour", while the Cayetano Heredia Peruvian University has three courses: pediatrics, seminar on child abuse and medical ethics.

237. Nursing schools have a course dealing with subjects covered in the Convention. Schools for social workers have two courses covering the Convention and the Children's and Adolescents' Code: "Family and gender law", "Health, education and development" and "Social work with children and adolescents". Psychology departments have five or six courses on the subject of children and adolescents. Sociology departments have two courses.

VI. CIVIL RIGHTS AND FREEDOMS

238. The Political Constitution and the Children's and Adolescents' Code embody the civil rights and freedoms of the population in general and of children and adolescents in particular. This chapter deals with the provisions governing these rights and freedoms and gives a specific description of the legal arrangements to ensure that children are included in the National Register of Identity and Civil Status, the campaigns to increase awareness of the right to a name and civil registration, the cases of registration of abandoned children, the preservation of identity and the various arrangements for ensuring and strengthening the exercise of civil liberties by children and adolescents.

239. Several legislative measures have been adopted in Peru to increase the number of children and adolescents included in the civil register. These include the 1993 Peruvian Political Constitution, which states:

> "Article 2. Every person has the right to ... an identity ... the fetus is a legal person in so far as this is in its interest ...;
>
> "Article 4. The community and the State are especially mindful to protect the child, the adolescent ...;
>
> "Article 6. ... All children have equal rights and duties. Any mention of the personal status of the parents and the nature of filiation in civil status registers and in any other identification document is prohibited."

and the provisions of article 6 of the Children's and Adolescents' Code, amended by Act No. 26497, which state:

> "Article 6. Children and adolescents have the right to a name, to Peruvian nationality, to know who their parents are and to be raised by them. They shall be registered by the mother or a responsible person immediately after birth in the relevant civil status register.
>
> "If this is not done within a period of 30 days, registration shall be effected in accordance with the provisions of article VI of the Act on the national register of identity and civil status.

"The unit in charge of the register shall issue the first birth certificate without charge within a period not exceeding 24 hours.

"The State guarantees this right through the National Register of Identity and Civil Status.

"For the purposes of the exercise of the right to a name, the relevant provisions of the Civil Code shall apply."

240. In addition, the 1984 Civil Code states:

"Article 19. Every person has the right and the duty to possess a name. This includes the right to a family name.

"Article 21. Newborn children of unknown parentage shall be registered under the appropriate name assigned by the registrar of civil status.

"Article 25. Proof regarding names shall consist of the relevant inscription in the registers of civil status".

241. The Regulations on the Organization and Functioning of the Civil Status Register state:

"Article 32. The request for the registration of a birth shall be made, in the manner indicated in this article, by the closest relative of the newborn or the person caring for the newborn."

and Act No. 26497, the Organic Law on the National Register of Identity and Civil Status, deals in articles 41, 43, 44, 46, 47, 48, 49, 50, 51, 52 and 58 with inscriptions in the register.

A. Name and nationality

242. The right to a name and a nationality is recognized and guaranteed both by the 1993 Peruvian Constitution (art. 2, para. 1) and by the Children's and Adolescents' Code (art. 6, amended by Act No. 26497).

243. Children are registered in the Register of Identity and Civil Status by means of a birth certificate (usually known in Peru as a "partida de nacimiento"). This birth certificate is the official document by which the State and society recognize and legalize the existence of a person and grant to him or her, inter alia, the right to a nationality and a name. In future, when the Register of Identity and Civil Status has been completely organized, registration will confer entitlement to a national identity document, which in the case of a newborn child will be accompanied by the fingerprint and the signature of the person who has custody of the child.

244. In order to ensure that children are registered, the State has made the law more flexible and provides a series of alternatives so that every person will be able to exercise this right. The measures taken to ensure that children are registered immediately after their birth are:

(a) Nation-wide campaigns to increase awareness of and provide information about the right to a name and the importance of names;

(b) Promulgation of legislation to establish that births are registered without charge;

(c) Establishment of civil registry offices in remote areas. For example, 171 civil registry offices were set up in the Loreto region, where 45,000 persons (children and adults) were registered;

(d) Establishment of national registry and civil status offices in hospitals run by the Ministry of Health and the Peruvian Social Security Institute, to register all births occurring in those hospitals;

(e) Ex officio registration of births for persons who do not do so within a period of 30 days following the birth, as required by law, because they do not want to be bothered with the requisite procedures;

(f) Publication and distribution of forms at all offices of Ombudsmen for Children and Adolescents and throughout the nation, by the PROMUDEH Ombudsman's Office, to facilitate ex officio registrations (ad hoc);

(g) Registration may be effected at the place of birth or the place of residence; this alleviates the problem which existed when parents travelled from place to place with the newborn child and it was difficult or impossible for them to return to the place of birth in order to effect the registration; and

(h) Registration by a third party. The child does not necessarily have to be registered by the parents and may be registered by other persons, in the following exclusive order of preference: one or both of the parents; siblings who have attained their majority; aunts or uncles; grandfathers or grandmothers; tutors or guardians; persons with legal custody of the child.

Information campaigns

245. The first campaign was conducted by the Ministry of Justice, with the assistance of UNICEF, Radda Barnen and Aspen, from 15 August to 15 September 1994. Posters were prepared, as well as a television announcement and material for distribution throughout the nation. UNICEF supported the provincial municipalities in the implementation of campaigns on the right to a name and registration, in the 15 most heavily populated regions of Peru.

246. A second campaign on the right to a name was conducted by PROMUDEH, through the Division for the Welfare of Children and Adolescents and its Ombudsman's Office. It was conducted during 1997, with the support of UNICEF. This was a nation-wide campaign in which material about registration was distributed through the Ombudsmen for Children and Adolescents. In addition, training was given to mothers in grassroots social organizations and mother caregivers at the Wawa Wasi day care centres, so that they can pass on this information to the mothers of children in their care.

247. Campaigns on the right to a name are continuing at the national level, with the participation of over 730 Ombudsmen for Children and Adolescents and

the collaboration of the civil registrars of the provincial and district municipalities.

Persistent obstacles to the registration of births

248. Lack of education is one of the main obstacles to the registration of births in the National Register of Identity and Civil Status. For many Peruvian parents, the identity of persons is not important; they are not aware that legally a person does not exist unless the birth has been registered.

249. Another problem is the dispersion of villages in the jungle, which are far from the civil registry offices. Accordingly, nation-wide campaigns have been conducted to publicize this right.

250. In addition, civil registry offices have disappeared in some parts of the country as a result of accidents or criminal actions. In some places, birth certificates were damaged or destroyed. This problem is being solved by the establishment of special registers at civil registry offices.

Birth certificates

251. The birth certificate ("partida de nacimiento") is the document which proves the existence of a person. It contains the following information:

- Country of registration, in this case the Republic of Peru;
- Registration number;
- Date and place of registration;
- Name of the person being registered (father's and mother's family names and given names);
- Sex of the person being registered;
- Geographical location of the place of birth (department, province, district);
- Address of the place where the birth occurred (hospital, health centre, residence, etc.);
- Time, day, month and year when the birth occurred (in numbers and letters);
- Identification of the father (given names and family names, nationality, identity document, age, place and date of birth);
- Identification of the mother (given names and family names, nationality, identity document, age, place and date of birth);
- Given names, family names and identity document of the person registering the birth; and
- Given names, family names and identity document of the registrar.

252. Since all children are equal, article 6 of the 1993 Constitution prohibits any mention of the personal status of the parents and the nature of filiation in civil status registers and in any other identity document. Any such notation is also prohibited in cases of adoption.

Abandoned children

253. When a child or adolescent is brought before a court or comes before the court voluntarily and is unable to give information such as his or her name and parents' names, a protection investigation is initiated and all necessary inquiries are pursued in order to make an identification. If the child is small, the first step is to request the live birth certificate from the hospital in order to identify and ascertain who is the mother. Notices are also placed in the official gazette El Peruano and in other widely read publications in the place where the child was found. If the name of the presumed parents is known, the electoral register is consulted to ascertain whether they are registered and their personal data are noted. Because of the need for a protection investigation in order to verify the identity of the child or adolescent and place of origin if the parents are unknown, this guarantee amounts to an obligation on the part of the judge.

254. Articles 6 to 9 and article 260 (a) of the Children's and Adolescents' Code describe the methods to be followed (archives, registers, scientific methods and communication media) in the investigation to locate the parents. An attempt is made to return the minor to his family, if this would be in his or her interest and the particular circumstances have been verified.

255. If the child is orphaned or abandoned or the parents are unknown, registration may be requested by: (a) the director of the protection centre or director of the education centre caring for the child or adolescent; (b) the representative of the Public Prosecutor's Department; (c) the representative of the Ombudsmen for Children and Adolescents; or (d) the special judge.

B. Preservation of identity

256. There have been some cases in Peru of illegal deprivation of some element of identity. This occurred when the 1963 Minors' Code was in force and unscrupulous persons distorted information about children for purposes of adoption or personal gain. In many cases, the culprits were identified and punished. Now that prior declaration of abandonment is required, there are few cases of this kind.

257. With a view to preventing such cases of distortion, the national police and the National Register of Identity and Civil Status have offices in all the hospitals administered by the Ministry of Health and the Peruvian Social Security Institute. In these offices, the child's fingerprints are taken at the time of registration and are sent to a central registry. It is hoped that this fingerprint registry will be implemented throughout the nation, but this has not yet been achieved.

258. Alteration, replacement or illegal deprivation of the identity of a minor is classified as an office in article 145 of the Penal Code in the following words:

"Article 145. Any person who endangers or conceals a minor, replaces him or her by another, attributes an incorrect filiation or uses any other means to alter or delete the filiation shall be liable to a custodial penalty of not less than one or more than five years."

259. In order to prevent such offences against identity, many institutions have decided that, when decisions are to be taken with regard to children or adolescents, they will deal directly with the National Office of Identity and Civil Status to obtain the birth certificate. This guarantees that the birth certificate provided is not forged and prevents violation of the child's right to an identity.

C. Freedom of expression

260. Children and adolescents have the right to freedom of expression, which is guaranteed by article 2, paragraph 4, of the Peruvian Constitution and by article 10 of the Children's and Adolescents' Code.

261. This right is exercised in important forums such as school parliaments. These were first held in 1994, with the participation of 1,245 schools, which in turn designated 488 representatives who participated in 18 parliaments at the level of Education Service Units (USE) and a metropolitan parliament. The metropolitan parliament of Lima and Callao had a positive impact on public opinion. For the first time, on the occasion of Children's Rights Week, children and adolescents were the main protagonists. In 1995 and 1996, there was broader school participation in the parliaments and following a review each year the number of representatives of each USE was reduced and there were games and group activities, including outings (to businesses and authorities, etc.).

Table VI.1

Peru: school parliaments, 1994-1996

Activity	Years			
	1994	1995	1996	1994-1996
Schools represented in USE parliaments	1,245	1,800	4,884	7,929
School parliaments held at the level of USEs or district education authorities	17	26	72	115
Departmental parliaments	-	-	1	1
Regional parliaments	-	-	9	9
Children participating in regional events	-	-	496	496
Metropolitan parliament	1	1	1	3
Participants in metropolitan event	220	180	112	512

Source: The non-governmental organization Radda Barnen.

Another important means of expression for children and adolescents is the school correspondents programme sponsored by the newspaper El Comercio. This programme allows schoolchildren to write in and express their ideas and opinions about what is happening in their schools in the society in which they live. The newspaper devotes one page to topics relating to children and adolescents, where schoolchildren are their own spokespersons about events of interest and concern to them. The correspondents edit the page and are responsible for sending articles and participating in activities which interest them and for which they have time. They have a pass enabling them to enter the newspaper offices to leave their notes, use the files of press clippings or obtain advice for their articles.

262. Each year a national correspondents' convention is attended by more than 600 school children from all over the country, who enjoy a full day of journalism, fun and learning. This convention includes a lecture, press conference, lunch, videos and a wall newspaper competition. In 1997, the theme was "Rights and duties of citizens".

Table VI.2

Peru: number of school correspondents, 1992-1997

Year	Number of registered correspondents
1992	650
1993	720
1994	860
1995	1,020
1996	1,400
1997	1,864

Source: El Comercio.
Approximately 600 schools in Lima and the provinces.

263. In order to encourage children and adolescents to express their opinions, the Division for the Welfare of Children and Adolescents of PROMUDEH organizes events such as "Mobilization through the voice of adolescents", where adolescents have an opportunity to express their views. A panel discussion was held recently, at which the panelists were authorities and the audience consisted of children and adolescents, to discuss the loss of human life and the injuries at the concert given by the Venezuelan singers Servando and Florentino at a fair. The adults (authorities) put forward ideas, which were discussed by the participants. An attempt was made to propose alternatives to the adolescents, so that events such as the one discussed will not happen again.

264. An inter-district debating contest was held on Peruvian radio in July 1997, with the participation of 16 districts through delegations of 30 adolescents (15 boys and 15 girls). Each district was represented by two adolescents. Topics of current interest were debated and the adolescents' opinion on drug use was particularly sought.

D. Freedom of thought, conscience and religion

265. Article 2, paragraph 3, of the Constitution states on this subject: "Every person has the right ... to freedom of conscience and religion in individual or collective form. No one may be persecuted on account of his or her ideas or beliefs. Freedom of opinion is unlimited. All confessions may freely be publicly exercised as long as they do not offend public morals or disturb public order." The Children's and Adolescents' Code goes even further, stating in article 10 that "... children and adolescents enjoy freedom of thought, belief and religion, even if this differs from that of their parents or of the persons responsible for them."

266. Various religions exist in Peru and the churches include children and adolescents in their congregations. Members of the same household often profess different religions, in accordance with their individual beliefs.

E. Freedom of association and peaceful assembly

267. Article 13 of the Children's and Adolescents' Code establishes that all children and adolescents have the right to freedom of association for lawful purposes. However, only adolescents have the legal capacity to constitute non-profit legal entities and to perform actions strictly related to the purposes of the association, provided that they do not involve the disposal of property. Children may become members of such associations.

268. The National Police Division for Children and Adolescents (DIVIPOLNA) has organized several children's associations, including:

- "COLIBRI-PNP", an organization for children and adolescents who work. It was founded in 1991 and currently operates nation-wide, with a total of 2,855 members. It has organized two national meetings, at which each of the participating associates analyzed their situation and proposed alternative solutions to their problems;

- "Clubs of Children and Adolescents working with the Police", composed of children and adolescents and organized at the district level throughout the country. Their aim is to promote sports fostering feelings of solidarity, respect and mutual help. They have existed since 1979 and a total of 100,000 children and adolescents are members;

- "School police" is a programme organized in State schools in order to promote discipline and order among the student body on and off the school premises. Functioning since 1984, it includes a total of 44,540 children and adolescents;

- "GAVIOTA" is a programme for street children and adolescents in Lima and Callao, designed to reintegrate them in school and society. It started in 1995 and currently reaches 50 adolescents of both sexes.

269. The Division for the Welfare of Children and Adolescents of PROMUDEH, through the Ombudsmen's office, is promoting the formation of associations of

children and adolescents, through the creation of school ombudsmen for children and adolescents; the adolescents work with the Ombudsmen to promote the rights of children. In addition, a "Network of Teenage Leaders" has been created, with the support of the United States Embassy and with the aim of training and involving suitably motivated and trained leaders who will form organizations, grow, become involved in the community and develop as a grassroots movement which will be helpful in combating drug abuse. The "Network of Teenage Leaders" is operational in several districts of Lima and Callao and is composed of 130 adolescents from 35 institutions in metropolitan Lima.

270. There are also other organizations of children and adolescents promoted by non-governmental organizations including the Centre for Social Research and Publications (CESIP), the Association of Labour for Development (ADEC-ATC), the Movement of Working Children of Christian Workers (MANTHOC), the Project of Integrated Development (PRODEI), GENERACION, IRESIMA of Piura, CECYCAP of Arequipa, QOSQOMAQUI of Cuzco, CODHE of Ica, PRONATS of Cajamarca, Pucallpa and Chiclayo. Each of these organizations has its own objectives depending on the category of child or adolescent which it targets but all have the task of promoting knowledge of and respect for the rights of children.

271. The National Movement of Organized Child and Adolescent Workers in Peru (MNNATSOP) was formed with the assistance of all the organizations. It is working to promote the development of all children and to fight for the rights and social responsibilities of children and adolescents who work. The Movement promotes policies and solutions to deal with problems of childhood, in particular problems in the area of health, labour, social security, education, organization, etc.

272. All children and adolescents in Peru have the right to assemble peacefully, the only restrictions being those which relate to national or public security, public order, protection of public health and morals or protection of the rights and freedoms of third parties.

F. Protection of privacy

273. In article 2, paragraph 7, the Peruvian Constitution guarantees this right "To honour and good reputation, to privacy in personal or family matters, as well as to a person's own expressions and visual representations", while the Children's and Adolescents' Code does not refer to this question specifically. However, article 74 of the Code establishes protection of the identity of children and adolescents when they are involved in an offence as perpetrators, participants or witnesses, prohibiting publication of their identity in any information media.

274. As a supplemental norm, the Civil Code specifies in articles 14 to 16 that it is the duty of the State to protect the right of every person to privacy in personal or family matters and in correspondence. Similar protection is provided for inviolability of the domicile.

275. If any of these rights are violated, the injured party may demand the cessation of the injurious acts. In the case of inaccurate statements in the media, the person alluded to has the right to demand the dissemination of a correction without charge, immediately and proportionally, without prejudice to

any criminal and monetary liability which may exist. On the basis of a complaint from the special procurator, the judge also punishes any person who violates the secrecy of investigations relating to children and adolescents.

276. In cases where the aggrieved party is a child or adolescent, proceedings relating to criminal and monetary liability are instituted by the parents, guardians or legal representatives.

277. In the case of children in placement, it should be noted that all investigations or administrative or judicial proceedings, as well as treatment and any data possessed by the institution concerning the child or adolescent are confidential in nature and accessible only to the persons directly involved. The staff of the court and the technical team are also obliged to respect the confidentiality of the case; failure to do so will render them liable to administrative and criminal proceedings.

G. Access to information

278. Children and adolescents have access to all types of information through the mass media. However, since not all information provided by the media is suitable for their age and stage of development, certain restrictions are imposed on the media. For example, television programmes for adults must be aired after 10 p.m. and must be preceded by a warning about the nature of the film or documentary, so that parents can be free to decide whether their children are old enough and mature enough to watch the programme. At present there are 507 television stations (sending and receiving). There are 1,107 short-wave and medium-wave FM radio stations. With the exception of the constitutional province of Callao, all Peruvian departments have a television station (sending or receiving). All departments have radio stations, AM or FM, so that radio is the main medium of mass communication.

279. One of the best ways of raising the cultural level of a population is to promote the habit of reading, particularly among children and adolescents. In Peru there are 5,219 public and school libraries registered in the national library system up to 1995.

Table VI.3

Peru: number of libraries registered in the national library system, 1992-1995

Type of library registered	1992	1993	1994	1995
Registered public libraries	219	133	204	155
Registered school libraries	202	451	330	221
Bibliographic material distributed in school libraries	11,970	52,269	33,212	12,005

Source: Peruvian National Library: General Directorate of Public Libraries.

280. Since 1994, the Ministry of Education has been trying to equip schools with basic libraries, guaranteeing that these modules are available to the most

vulnerable groups and have access to information. In 1994, 14,799 modules were distributed to primary schools and 2,356 modules to secondary schools; in 1995, 12,673 modules were distributed to primary schools and 2,951 modules to secondary schools. In 1997, 8,923 library modules were distributed to primary schools, 1,424 modules to secondary schools and 4,478 modules for civic education. In addition, national competitions have been held to encourage writing by children.

H. Right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment

281. Such conduct is punishable under criminal law. It is included among offences against life, body and health. Cases of torture or other ill-treatment or cruel, inhuman or degrading punishment fall within what the Criminal Code considers as injuries under articles 121 and 122, supplemented by articles 121A and 122A in accordance with Act No. 26788 of 16 May 1997. These supplementary articles are the ones referring to child abuse.

282. The fact that the victim is a child constitutes an aggravating circumstance when the penalty is established:

"Article 121. Any person who causes serious harm to another person's body or health shall be punished by deprivation of liberty for not less than three or more than eight years.

"The following shall be considered as serious injuries:

"1. Injuries which place the life of the victim in imminent danger.

"2. Injuries which mutilate a limb or principal organ of the body or make it unable to function, or which result in a person being unable to work, disabled or afflicted by a lasting psychological disorder, or which cause serious or permanent disfigurement.

"3. Injuries which involve any other harm to the bodily integrity or physical or mental health of a person requiring 30 or more days of care or rest, prescribed by a physician.

"If the victim dies as a result of the injury and if the perpetrator could anticipate this result, the penalty shall be deprivation of liberty for not less than five or more than ten years.

"Article 121A. In the cases covered by the first part of the preceding article, when the victim is under 14 years of age and the perpetrator is the father, mother, guardian, caregiver or person responsible for the victim, the penalty shall be deprivation of liberty for not less than five or more than ten years, suspension of parental authority under article 83 (b) of the Children's and Adolescents' Code and disqualification as specified in article 36, paragraph 5.

"The same penalty shall apply when the perpetrator is the spouse, common law partner, older relative, natural or adoptive descendant or collateral relative of the victim.

"If the victim dies as a result of the injury and if the perpetrator could foresee this result, the penalty shall be deprivation of liberty for not less than six or more than 15 years.

"Article 122. Any person who causes harm to another person's body or health requiring more than 10 and less than 30 days of care or rest prescribed by a physician shall be punished by deprivation of liberty for not less than two years and a fine corresponding to a period of from 69 to 150 days.

"If the victim dies as a result of the injury and if the perpetrator could foresee this result, the penalty shall be deprivation of liberty for not less than three or more than six years.

"Article 122A. In the cases covered by the first part of the preceding article, when the victim is under 14 years of age and the perpetrator is the father, mother, guardian, caregiver or person responsible for the victim, the penalty shall be deprivation of liberty for not less than three or more than six years, suspension of parental authority under article 83 (b) of the Children's and Adolescents' Code and disqualification as specified in article 36, paragraph 5.

"The same penalty shall apply when the perpetrator is the spouse, common law partner, older relative, natural or adoptive descendant or collateral relative of the victim.

"If the victim dies as a result of the injury and if the perpetrator could foresee this result, the penalty shall be deprivation of liberty for not less than four or more than eight years."

283. Prior to 1994, the severity of injuries was evaluated solely by legal medical certificate. In other words, only physical harm to the person was taken into account. Subsequently, during campaigns on child abuse conducted by various governmental and non-governmental agencies, other types of abuse began to be considered and now not only a legal medical examination but also a psychological or psychiatric examination is required.

284. Many cases of child abuse came to light following the campaigns devoted to this subject, since the population became more aware of the issue and started to report cases. Campaigns to promote peace, tolerance and respect for human rights are conducted constantly by groups of citizens of various political leanings and by the Government itself.

285. Through the Division for the Welfare of Children and Adolescents, PROMUDEH is currently trying to set up a nation-wide inter-sectoral network involving the Ministries of Health, Education and Justice and the Peruvian National Police, courts, procurators' offices, organized community groups, Ombudsmen for Children and Adolescents, churches, etc. The aim is to coordinate activities. Progress has also been made in creating local networks in various districts of Lima (Villa El Salvador, San Juan de Lurigancho, Comas, El Agustino and Lima Central Zone) and inland in Arequipa, Ica, Tacna, Ancash and the Grau region.

286. Campaigns conducted by the various media include: in 1994, a 30-second television spot "Papel Arrugado" on the topic "No to abuse", during National Children's Rights Week; a 30-second radio spot "Papel Arrugado" on the topic "No to abuse", during National Children's Rights Week; publication of a 16-page brochure on child abuse; and a poster "Don't ill-treat me - defend my rights!". In 1995: 30-second television spot on the topic "No to abuse", during National Children's Rights Week; a brochure "Let's stop child abuse"; and a poster "Let's stop child abuse. Children and adolescents deserve to be well treated".

287. On 30 November 1995, the Children's Defence Institute (IDEIF) and the municipality of San Borja held the first inter-agency workshop on child abuse under UNICEF auspices and with the participation of procurators, health workers, teams from the child health abuse units (MAMIS), Ombudsmen for Children and Adolescents, representatives of INABIF, the National Police, community organizations and non-governmental organizations, among others.

288. The purpose of this workshop was to bring together representatives of the various public and private agencies whose functions involve them in the prevention and treatment of child abuse, in order to start a dialogue leading to a unified concept and typology of the problem and also to analyse the problems encountered by each agency and the possibility of coordinated work permitting a more effective and efficient approach to the problem.

289. In 1996, the Centre for Development and Psychosocial Counselling (CEDAPP) and the Division for the Welfare of Children and Women of the municipality of the district of San Borja organized, under UNICEF auspices, four inter-agency workshops on child abuse. The objectives were the following: to encourage, support and consolidate comprehensive and coordinated intervention by the various agencies and bodies involved in detecting and treating child abuse, and to make these agencies aware of the need to publicize the magnitude of the problem of child abuse through a register of cases and compilation of statistics.

290. The first inter-agency workshop (2 May 1996) dealt with the following topics: concept and types of child abuse; factors to be considered in interviews with abused children; and registration of individual cases and monthly registration of cases of child abuse. At the second inter-agency workshop (8 August 1996), the topics were: roles, functions and procedures of agencies involved in detecting and preventing child abuse; and registration of individual cases and monthly registration of cases of child abuse. At the third inter-agency workshop (17 October 1996), the topics were: networking, and initiation of reporting, exchanges and coordinated actions by zones. At the fourth inter-agency workshop (26 November 1996), the topics were: experience of coordinated work by zones; evaluation of work done in 1996, and prospects and proposals for 1997.

291. At the four workshops held during 1995, in addition to efforts to meet the goals set, an attempt was made to ascertain the interests of the participants, since they reflect the needs which they encounter in their daily work with abused children.

292. In 1997, the Division for the Welfare of Children and Adolescents of PROMUDEH organized a fifth inter-agency workshop on child abuse, with the

participation of Ombudsmen for Children and Adolescents. Invitations were sent to 100 representatives of various agencies and discussions were held on methods of care, procedures for follow-up of cases and agreement on a single register of cases.

293. In addition to this workshop, eight workshops for Ombudsmen were devoted to interview techniques in cases of child abuse and were attended by 335 Ombudsmen from 11 cities, with the aim of improving services to those affected and those responsible.

Investigation of cases

294. The Ombudsmen for Children and Adolescents, police stations, family procurators and family courts are the organs competent to receive reports and investigate cases of child abuse. It is known that complaints of child abuse have increased in recent years, because the general population is more aware of the problem and of the existence of Ombudsmen for Children and Adolescents. However, the investigation by the Ombudsmen is extrajudicial: if abuse is proved and if it is serious, the appropriate complaint will be submitted to the competent authority. The Ombudsmen for Children and Adolescents dealt with 668, 1,322 and 2,610 cases of abuse in 1994, 1995 and 1996 respectively, making a total of 4,600 cases.

295. The National Police, through special sections at police stations and prevention centres for children and adolescents, is responsible for investigating all cases of abuse, violence and abandonment, which are then reported to the competent authority for the imposition of the appropriate penal measures.

296. The courts initiate protection investigations on behalf of abused children and take the necessary action to find the solution which is best for the child or adolescent.

297. As part of the mental health programme, since 1994 the Child Health Institute (ISN) has 15 child health abuse units (MAMIS) throughout the nation. These units are increasingly busy. For example, the child abuse unit in the Lima National Children's Institute cared for 118 children in 1995, or an average of 10 per month, and had 275 cases in 1996, bringing the average to 23 per month. This year, the largest number of patients were girls, who accounted for 68 per cent. The breakdown by age groups is given in table VI.4.

Table VI.4

Peru: number of cases registered in child health abuse units, by age group, 1997

Age group	Number of children
0 to 11 months (infants)	32
1 to 3 years	63
4 to 5 years	33
6 to 11 years	82
12 to 18 years	65
Total	275

Table VI.5

Peru: number of cases registered in child health abuse units, by type of abuse, 1997

Type of abuse	Number of children
Abandonment or neglect	97
Sexual abuse	84
Physical abuse	60
Emotional abuse	19
Attempted suicide	15
Total	275

VII. FAMILY ENVIRONMENT AND ALTERNATIVE CARE

298. Thanks to the revision of the norms in force, Peru is one of the democratic societies based on the defence of human rights. Unfortunately, not only is the voluminous legislation lacking sanctions for failure by parents to fulfil their obligations towards their children (food, education and security) but harmonious family relations are not always rapidly and suitably reinforced in the administration of justice.

299. Despite the progress achieved in the legislative area, implementation by public agencies and development of social programmes for the protection of children and adolescents, this segment of the national population continues to be subject to parental abandonment and some of them do not have access to public care-giving institutions. In other words, the relevant legislation to protect children and adolescents has not been sufficiently persuasive to prevent the abandonment of children or to overcome parents' resistance to the payment of child support.

300. This chapter deals with some of these social problems. Consideration is given to the responsibilities of parents, programmes of assistance to parents and children and treatment of children in the event of separation of the parents and a description is given of inter alia the procedures for requesting judicial authorization for travel by minors and the rules governing adoption.

A. Parental guidance

301. Various types of family exist in Peru: marriages, civil or religious; common law marriages, with or without legal impediments; single-parent families, consisting of children and one parent (23 per cent of Peruvian households are headed by women); families consisting of a relative and children, and families created by ties of affection between third persons and certain children.

302. This classification of family types is not reflected in the law, which primarily recognizes the union of man and women through civil matrimony and, with certain legal effects, common law union without legal impediments.

303. It should, nevertheless, be noted that the law proviues for equality of all children and adolescents, who possess all the obligations and rights

recognized in the Constitution and in the Chi'dren's and Adolescents' Code. In addition, the Code specifies the obligations and rights of parents and provides for suspension of parental authority in the event of non-fulfilment.

Family counselling

304. Several governmental and non-governmental agencies have family counselling programmes. One involves schools for parents, aimed at parents and couples, to train them to assume their parental role responsibly. The schools for parents are not only for this purpose but are also designed to foster interaction between parents and children. For example, in addition to the guidance given to parents regarding various matters related to childhood and adolescence such as responsible parenthood, children's education, sexuality, life as a couple, community participation, citizens' security, and rights, duties and freedoms of children and adolescents, a series of activities are organized in schools in which parents and children participate as a team and which strengthen parent-child bonding, friendship and companionship.

305. As part of the education programme, in the education sector and INABIF, efforts are made through the schools for parents to strengthen the family values which guarantee the safety and well-being of family members. In the education sector, this programme is conducted at three levels: early, primary and secondary, with the aim of improving the quality of life of families. It has the following objectives: to actively involve parents in school activities, encouraging reflection and exchange of experience regarding the children's education; to promote values and social skills which will improve family dynamics, communication, children's education and well-being and conditions for learning at home; to give parents the necessary information and guidelines on the physical, psychological and social development of children and adolescents, so as to achieve conditions conducive to all-round development; and to anticipate situations of risk affecting families. The materials prepared and disseminated are: 10,000 posters, 5,000 guides on the organization and development of schools for parents, 5,000 inserts on the basic topics of the guides, and 500 educational videos on "Growth in the family".

Table VII.1

Peru: programme of schools for parents

Year	Skilled personnel		Schools	Number of parents
1993	Only Lima and Callao	100	25	450
1994	Nation-wide	329	64	788
1995	Nation-wide	886	220	8,800
1996	Nation-wide	1,420	330	34,000
1997	Nation-wide	2,560	1,450	145,000

Source: Ministry of Education, National Department of Early and Primary Education.

306. In addition, the Division for Human Development of PROMUDEH has a family unit which, as its name indicates, is responsible for formulating social

policies for the development and strengthening of the family. Strengthening in two fundamental respects: firstly, as a productive unit, through the creation of small or micro businesses that can improve their quality of life; secondly, as a fundamental unit of the State for the responsible assumption of their roles. The Division for the Welfare of Children and Adolescents, through the Ombudsmen for Children and Adolescents, also works to strengthen family ties and to counsel families, which generally turn to the Ombudsmen for help in solving their problems.

B. Parental responsibilities

307. Article 6 of the 1993 Constitution, which is the basic norm of the Peruvian State, establishes the right and duty of parents to feed, educate and provide security to their children and the duty of children to respect and assist their parents. Similarly, book III of the Civil Code deals with family law and covers marriage and the duties and rights arising out of marriage. These provisions include joint obligations towards children, marital and extra-marital filiation, parental authority, invalidity of the marriage and dissolution of marriage, establishing the legal status of the children in each case.

308. Articles 418 to 471 of the Civil Code deal with the duties and rights of parents and with the causes of extinguishment, loss and suspension of parental authority.

309. The Children's and Adolescents' Code deals with parental authority, amending certain articles of the Civil Code relating to the duties and rights of parents and the suspension, extinguishment and restoration of parental authority (articles 82 to 88 of the Children's and Adolescents' Code). Article 82 specifically enumerates the duties and rights of parents vis-à-vis their children. It repeals article 423, paragraph 4, on parents' right to receive assistance from their children in keeping with their age and status and without prejudice to their education. This is because of the persistent and serious social problem arising, particularly in the mountain and jungle areas, when the right of children to education and health is superseded by their obligation to help with farm work, tending of livestock, etc. The current text in force on this subject states: "The duties and rights of parents exercising parental authority over children and adolescents who are their offspring are as follows: (i) To watch over their all-round development; (ii) To provide for their support and education; (iii) To supervise their education and training for work suited to their vocation and skills; (iv) To set an example of good living and to chastise them; (v) When their actions are not sufficient, they may refer to the competent authorities; (vi) To keep them in their company, referring to the authorities if necessary in order to recover them; (vii) To represent them in civil matters until they acquire capacity to act and civil liability; (viii) To receive assistance from them in keeping with their age and status and without prejudice to their education; and (ix) To administer any property owned by their children and enjoy the usufruct thereof."

310. Failure to fulfil any of these obligations results in the suspension and, if repeated, in the extinguishment of parental authority.

Assistance to parents in the fulfilment of their responsibilities

311. Through INABIF, PROMUDEH organizes programmes of assistance to severely impoverished families and persons, with the aim of improving their quality of life. These programmes cover segments of the population aged from six months to three years, who receive total care, and children and adolescents from 4 to 17 years of age, who receive care outside school while their parents are working.

312. The INABIF assistance programme includes:

- Day care: children from six months to 17 years of age and especially children under six years of age receive total care consisting of a balanced diet, emotional support, psychological guidance, early stimulation, preparation, preventive health care and recreational opportunities;

- School libraries: providing mainly school text books and general reference works for children and adolescents in the community;

- Video libraries: audio-visual aids of an educational nature for children and for the community;

- Games: playrooms with educational and recreational games for children attending the community centre;

- Youth club: to channel young people's concerns about social support for their community, giving them an opportunity for recreation and contacts with other young people. Folklore workshops and artistic and cultural events.

313. Since November 1993, Wawa Wasis (children's homes, in Quechua) have also been providing total care for children under three years of age: meals, security, monitoring of growth and development, and study of psychological and social development.

314. The Wawa Wasi project, backed by the Inter-American Development Bank (IDB) and by the European Community and strongly supported by the State through the Ministries of Education and Health and the Ministry of the Presidency, is now administered by PROMUDEH. Over 5,800 Wawa Wasis have been established throughout Peru and are currently attended by about 35,000 children. As the programme is now almost four years old, it is estimated that, because of mobility among children, it has reached more than 80,000 children. The aim of the project is to provide total care (early stimulation, nutrition and health) to working mothers' children under three years of age, mainly those in a critical state of poverty.

315. In addition to providing care to children, the Wawa Wasi project also gives instruction in child care. Maternal caregivers, who are responsible for the total care of children in the community, are given training, technical advice and ongoing support in topics related to child rearing; this training is mainly geared to monitoring of healthy children, psychological and social development, infant feeding, children's diseases and disease prevention.

316. The mothers who use the Wawa Wasis are given information and guidance about basic nutrition and infant feeding, monitoring of growth and development, immunizations, hygiene and early stimulation, as well as activities to promote their personal and social development, since they are given the opportunity to increase their income because their young children are looked after while they work. Parents and guardians in the community in general benefit from dissemination of information and awareness campaigns, particularly about nutrition, health and early development.

317. These efforts are also reinforced through mass media such as radio and, above all, through direct approaches to the inhabitants of poor areas publicizing the concepts of early development, use of family time and family and community responsibility for enforcing the rights of children and adolescents.

318. Food aid is provided through the National Food Aid Programme (PRONAA), which is administered by PROMUDEH and which provides 29,000 meals daily, giving priority to areas of poverty and severe poverty. The meals are prepared in the cafeterias and Children's Food Services (SAIS) in the community, which supply the local Wawa Wasis.

319. Following the transfer of the Wawa Wasi project to PROMUDEH, it has been possible to introduce changes which have improved on the initial plan. Although the target population has not changed, two other equally important aspects can now be incorporated. Firstly, there is an impact on mothers, because the income of the maternal caregivers and field staff will increase. Similarly, it is now easier for the mothers who leave their children in Wawa Wasis (particularly heads of household and teenage mothers) to study and work.

320. Secondly, there is also an impact on the communities where the Wawa Wasis are established, since organizational arrangements are created and/or strengthened through the administration of community care centres. The State provides this organized community with management training and the possibility of creating small businesses which can provide the Wawa Wasis with the food, materials and equipment they need. This organized community can then be the fulcrum for other strategies of PROMUDEH (violence, child abuse, right to a name, literacy, etc.) or of various units of the Ministries of Education and Health (reproductive health, family planning, etc.).

321. The new institutional arrangements for the Wawa Wasi project resulted in the inclusion of these two aspects and have transformed it into a social as well as an educational project. In 1996, this project reached 39,752 children throughout the nation: 20,329 children in Lima and 17,595 children inland.

Table VII.2

Peru: amounts budgeted for the Wawa Wasi project, 1994-1997

Year	Thousands of US dollars
1994	2,856.8
1995	5,681.0
1996	9,697.4
1997*	5,147.0

* Estimate.

C. Separation from the parents

322. The right of children or adolescents to live in a family is jealously protected by the Peruvian Constitution, which in article 4 states that the community and the State protect the family and encourage marriage, as the natural and basic institutions of society. For its part, the Children's and Adolescents' Code states more specifically in article 9 that all children and adolescents have the right to live, grow and develop within their family; it adds that they may not be separated from their natural family, except in special circumstances defined by law and with the sole aim of protecting them.

323. The family judge is the only authority competent to decide that children or adolescents should be separated from their parents; this decision is made after an exhaustive investigation in order to ensure that separation is in the best interests of the child.

324. The separation of children or adolescents from their father and/or mother may be ordered in civil proceedings, for example in cases where parents divorce and the children have to stay with one parent. In the absence of agreement between the parents, the judge decides who should have custody of the children. The judge also decides cases of guardianship by third parties, when both parents are sentenced to a custodial penalty because they have committed a crime. Separation may be ordered in placement proceedings, when the judicial authority separates minors from their family environment only as a last resort and for duly verified reasons, bearing in mind that placement is a transitional measure preceding insertion in the real family or in a substitute family.

325. The cases in which children or adolescents may be separated from their parents (art. 265 of the Children's and Adolescents' Code) are the following: when they are permanently without those persons who according to the law are personally responsible for their upbringing and education; when their parents do not fulfil the corresponding obligations or duties or lack the necessary moral or mental qualities to ensure the correct upbringing of the child; when the persons who are obliged to protect them abuse them or allow others to do so; when they are left in hospital facilities or other similar facilities with the clear purpose of abandonment; when they have been handed over to the judge or duly authorized institution by their parents or persons responsible for them for the purpose of adoption; and when they are exploited in any way or used in activities contrary to the law or to propriety by their parents or persons responsible for them, when such activities are performed in their presence.

326. It should be specified that the judge may in principle impose any measure as a protective measure and reaches a duly substantiated decision only after the proceedings have been completed. During the proceedings, the parties have the right and duty to participate and to submit any petitions and evidence for and against. If this is possible and necessary, the child or adolescent will be asked to participate, being interviewed by the judge in order to ascertain his or her opinion regarding the facts in dispute.

327. The ruling given by the judge may be reviewed by the hierarchically superior organ, which in this case is the family court, if either of the parties does not agree with the measure imposed by the judge. Such disagreement is expressed by means of a written appeal explaining the reasons for it. The time-limit for such an appeal in both civil and placement proceedings is three days from the day following the notification of the judge's decision (arts. 202 and 262 of the Children's and Adolescents' Code).

328. In the event that a child or adolescent is separated from one or both parents, both article 422 of the Civil Code and articles 96 to 100 of the Children's and Adolescents' Code emphasize the right of the child or adolescent to maintain personal relations and direct contact with the parents. For this purpose, a visiting schedule is provided for, with reference to the right and duty of parents to maintain personal relations and communications with any children who do not live with them. This right and duty extends to relatives and third persons, in accordance with the interests of the child or adolescent. However, in this connection, if the judge deems that this relationship would be prejudicial to the child, he may decide that it should be temporarily suspended or establish a special arrangement, such as foster placement, which may be requested by the Ombudsman for Children and Adolescents.

329. In the event that the judicial authority deems it necessary to separate a child from his or her parents in a protection investigation, for the child's safety and in accordance with strict guidelines appropriate for each case under consideration, it may allow parental visits. These decisions are taken by the judge in consultation with psychologists and social workers who intervene in each case and also advise the parents.

330. In other cases, when the child is in foster placement with third persons or in institutions providing total care, parents are always allowed visits at suitable times, including visits in the courtroom, if necessary, and such visits also include close relatives.

331. In the matter of visits, the opinion of the child is always taken into account, since he or she may refuse the visit or wish it to be longer. These factors are also evaluated in considering the child's request, depending on his or her progress and treatment.

Separation from parents in special situations

332. A different response is given in cases when children are separated from their parents because the parents are detained or imprisoned, exiled or deported or have died while in the custody of the State.

333. For persons in custody, prison establishments generally provide a schedule for family visits, including children. When they in custody for common crimes, visits are permitted daily; no complaints have been received in the family courts.

334. Persons who are in prison because they committed a terrorist offence may also receive visits from their spouse, children and relatives; however, since this is a special crime which has caused considerable harm to the country, prison establishments have stricter security arrangements than those required for common criminals. The arrangements are even more strict and restrictive for children and adolescents visiting their parents in prison.

D. Family reunion

335. Article 2, paragraph 11, of the Peruvian Political Constitution states that every person has the right "to decide where to live, to move across the national territory and to leave or re-enter it, except for health reasons or by

judicial order or application of the Act concerning Aliens." In accordance with national legislation, children and adolescents may move freely inside and outside Peru, the only requirement being the authorization of their parents. Such authorization is needed when the child or adolescent is to travel alone or accompanied by a parent. Articles 124 and 125 of the Children's and Adolescents' Code provide for two types of authorization, depending on the circumstances: notarized authorization and judicial authorization.

336. Notarized authorization is given in cases where both parents agree to the travel by the child or adolescent and is presented before a notary public. For travel abroad, it is specified that the authorization of both parents is required, whereas for travel inside the country the authorization of one parent will suffice.

337. Judicial authorization is given by the special family judge and serves to authorize travel by a child or adolescent in the event of the absence or disagreement of one parent; documents explaining the request are attached to the request for authorization.

338. In the case of the notarized authorization, the procedure is for the parents to apply to the notary public and, in the case of judicial authorization, if there is no opposition, the authorization is issued within a period of 24 to 48 hours.

Requirements for obtaining judicial authorization to travel

339. Applications for authorization to travel (made on a form available at windows in the offices of family courts, on which basic information is entered) must include: a copy of the applicant's electoral card (identity document); a recently certified copy of the birth certificate of the child or adolescent issued by the municipality; permission from one or both parents, given at the Peruvian consulate in the country where the parents are located, stamped by the Ministry of Foreign Affairs; if this permission is not available, the emigration papers of one or both parents (proof of departure from Peru), letters or other documents proving that the parents are abroad; and the presence of close relatives (parents, siblings) of one or both parents, who must also submit copies of their identity documents.

340. After the above-mentioned documents have been submitted, the judge will take a statement from the child or adolescent and from the applicant. If appropriate, he will also take a statement from the parents' close relatives. Then, if there is no impediment, he will issue the travel authorization.

341. However, problems often arise when one parent does not agree to allow the child or adolescent to travel, in which case the parent may state his or her opposition to the travel. In this situation, the case is opened for argument and all arguments submitted by the applicant and by the person objecting are collected and transmitted to the procurator for an opinion. Following the procurator's report, the judge will decide, taking into account the opinion of the child or adolescent and, above all, the best interests of the child.

342. One example of the observance and application of the principles of the Convention by family courts is the case which arose of a Japanese adolescent in

Peru whose parents, for political reasons, had false identity documents. The person responsible for the care of the adolescent (also Japanese) was detained on suspicion of ties with terrorist movements, since she belonged to the Japanese Red Movement. For that reason, the adolescent was referred to the family court and a protection investigation was initiated. In conversations with the judge, the adolescent expressed a desire to rejoin his family. In view of this request, and in coordination with the Japanese Embassy, after verifying his identity the court authorized the adolescent to travel to his country of origin, having ascertained that he would be reunited with his maternal grandmother, since his parents were in prison.

Progress and difficulties

343. The progress achieved with regard to family reunion is reflected in the norms in force, which have established a standard procedure that is extremely simple and rapid, is accessible to all and does not necessitate engaging a lawyer to obtain travel authorizations for a child or adolescent. The case has to be referred to the judicial organ only when there is some kind of "problem". One problem would be the fact that one or both parents are not present at the place where the adolescent is located or the fact that one of them objects to the travel by the minor. Other cases go to the notary public, who issues the travel authorization.

344. In addition, police surveillance at exits, control points and airports in Peru has considerably decreased the number of illegal departures by children and adolescents.

345. Any difficulties encountered in the free movement of minors are often the result of lack of awareness of the procedure to be followed or late transmission of the travel authorization. This has caused children or adolescents to miss their airline flights. It is known that unscrupulous people take bribes to allow minors who do not have the necessary authorization to leave from airports. Drastic measures have been taken to prevent abuses by unscrupulous members of the police and it has been established that airlines are responsible for minors who travel. In this connection, the minor's travel authorization now has to be produced before an airline ticket can be purchased.

E. Unlawful transfers and unlawful detention

346. Legally, it is established that a child or adolescent may leave the country or move within the national territory, with the express authorization of the parents; the aim is to prevent the unlawful transfer of minors.

347. Before issuing a travel authorization, family courts take great care to study the documents submitted and to verify that they do not contain any type of alteration and that they were issued recently by the competent authority. If there is any indication that a document may be forged or if some suspicious behaviour is observed, the judge will not grant the authorization until the documents have been reliably proved to be genuine and any doubtful points have been resolved.

348. One of the functions of the National Police is to check and monitor movements of children inside and outside the country; the relevant directive is

No. 19-DIVIPOLNA, which establishes procedures to be followed for monitoring and checking on children and adolescents travelling inside the country and abroad.

349. An underlying problem which it has still not been possible to solve is the shortage of police along the Peruvian border to monitor departures of children and adolescents. This is most acute in the area of the Peruvian Amazon.

350. There are currently no statistics on this type of problem and recent information relates mainly to cases of unlawful detention by subversive groups and kidnapping by common criminals.

351. Through its preventive centres and police stations in the seventh region, the Police Division for Children and Adolescents (DIVIPOLNA)-PNP keeps statistics on runaway and missing children and adolescents in Lima and Callao (see table VII.3).

Table VII.3

Peru: runaway and missing children and adolescents (1992-1997)

Year	Runaway	Missing
1992	59	750
1993	317	1,907
1994	436	2,309
1995	269	1,840
1996	282	1,663
1997 (March)	8	297

Source: DIVIPOLNA.

352. On 15 June 1989 at Montevideo, Bolivia, Brazil, Colombia, Ecuador, Guatemala, Haiti, Paraguay, Peru, Uruguay and Venezuela signed the Inter-American Convention on the International Return of Minors.

353. This international instrument, which has 38 articles, establishes the procedure to be followed to request the prompt return of minors who habitually reside in one of the States parties and have been illegally transferred from one State party to another or have been illegally detained after being legally transferred.

F. Payment of child support

354. In article 472, the Civil Code gives the legal definition of child support, which includes not only support as such but also housing, education, clothing and medical assistance. This concept, amended by article 101 of the Children's and Adolescents' Code, is expanded to encompass instruction, vocational training and recreation for the child or adolescent, so that the supported child receives total care; the mother's maternity expenses, from conception until the post-partum stage, are also covered.

355. The legislation also specifies who is obliged to provide support and mentions parents first and foremost, even if their parental authority has been suspended. In the absence of the parents, this obligation passes to siblings who have attained their majority, grandparents, collateral relatives to the third degree and other persons responsible for the child or adolescent. In the event of failure to meet this child support obligation, the law endorses various procedures to enable those concerned to assert their rights, both extra-judicial and judicial.

356. Not all applications for child support are dealt with in court, because of the existence of the Ombudsmen for Children and Adolescents. These Ombudsmen play an important role because they are close to the population and are thus the first to know about these problems and because it is their function to promote family ties and to make parents reflect on their responsibility. In this capacity, the Ombudsmen conduct extra-judicial mediation proceedings at which the commitment of the father or mother to meet the child support obligation is established. The Ombudsmen for Children and Adolescents in Lima and Callao dealt with 5,310 child support cases in 1996 and 2,285 cases during the first half of 1997; this represented the second largest area of activity of the Ombudsmen.

357. The people's legal advice bureaux and the court-appointed defence lawyers in family courts conduct extra-judicial mediation proceedings. In 1996, they dealt with 1,738 requests for child support, resulting in the consideration of 652 cases. If the non-compliance persists, judicial proceedings are initiated and the record of extra-judicial mediation drawn up by the parties may be used as evidence.

358. When judicial proceedings are initiated, the competent judge decides the case in the light of the following: For children and adolescents with clearly established family ties, a justice of the peace with legal qualifications at the place of domicile of the child or adolescent is competent and there are summary proceedings. This is because the district courts are widely scattered and because the only point at issue is the amount of the child support.

359. For children and adolescents without established family ties, the special civil family judges are competent and the procedure followed is single proceedings. Since these cases are complex, in order for the child or adolescent to be entitled to child support, the mother must at least prove that she was in a sexual relationship with the presumptive father at the time of conception. It is not necessary for this relationship to create ties of filiation, since the concept of the child to be supported has thus been established.

360. Both types of proceedings usually conclude with an agreement or a ruling. However, even if there is agreement among the parties regarding the child support or if the ruling establishes the amount of child support, in many cases this obligation is still not fulfilled. In order to enforce a child support obligation, the judge applies the measures established in article 204 of the Children's and Adolescents' Code: garnishment of wages and application of the precautionary measures prescribed in Peruvian legislation, such as garnishment of the offender's property or criminal arraignment on charges of failure to provide family assistance.

361. According to an inquiry conducted by family, criminal/civil and civil judges at the request of the Commission on the Rights of the Child of the Judiciary, the percentage of refusals to comply with child support rulings varies, as can be seen from table VII.4 below.

Table VII.4

Peru: refusals to comply with rulings

Type of judge	Refusals	No refusals
Special	28.9	5.8
Criminal/civil	30.6	3.7
Civil	30.8	15.4

Source: Inquiry of the Commission on the Rights of the Child of the Judiciary.

362. The main problem in obtaining payment of child support is when the person who is obliged to pay does not have a job, resigns or loses the job and there is no way of verifying the source of income. In such cases, it is literally impossible to enforce the child support decision.

363. Another problem arises when a very large amount of child support is fixed by judicial order, which exceeds what can be paid from the actual income of the person who is obliged to pay in view of the family responsibilities which he or she has to meet.

364. Another major difficulty is the limited free legal aid for persons to whom child support is owed, who cannot appeal to the jurisdictional organ because they cannot afford to engage a lawyer. The people's legal advice bureaux (13) and the court-appointed defence lawyers of family courts (36) of the Ministry of Justice and other free advice bureaux of bar associations, churches and municipalities are insufficient.

365. As a means of protecting the right of children and adolescents to receive child support from their parents or persons responsible for them, article 96 of the Children's and Adolescents' Code establishes as a prerequisite for granting of parental visiting rights that parents must prove that they have fulfilled their child support obligation. This legal provision is based on the fact that a parent who wishes to exercise the right to visit his or her child must fulfil the obligation to contribute child support.

366. A major improvement is that the Children's and Adolescents' Code and the 1993 Civil Procedure Code established that the proceedings in child support cases may be brief, unlike the lengthy and cumbersome proceedings required under earlier Codes.

367. Another improvement was the court-appointed defence lawyers in family courts, who currently number 40 and whose duties include provision of assistance without charge in child support cases, so that it is easier for people who are owed support to enlist the services of the Judiciary.

368. Yet another improvement is the establishment of the right to receive child support even before the proceedings have concluded, through an "anticipated allowance".

G. Children deprived of their family environment

369. When it is decided to separate children or adolescents from their family environment, the judicial decision is generally taken for the following reasons: the family environment is harmful or seriously jeopardizes the security and integrity of the child or adolescent or the family's financial situation is extremely precarious - sick parents, proven lack of resources, etc. - and makes it necessary for the minor to receive total care at a care centre on a temporary basis.

370. Reflecting the provisions of article 39 of the Convention on the Rights of the Child, articles 3 and 4 of the Children's and Adolescents' Code establish that all children and adolescents are entitled to live in a healthy and environmentally balanced milieu and to respect for their personal integrity; they may not be subjected to any form of torture or cruel or degrading treatment.

371. Before the promulgation of the Children's and Adolescents' Code, the Minors' Code in force in Peru obliged minors' judges, as they were called at that time, to visit institutions where minors were placed. This legal obligation was transferred by the current Code to the representatives of the Public Prosecutor's Department. This does not, however, prevent judges from visiting such institutions and visits are made jointly by judges and procurators without restriction, in the case of both public and private institutions.

372. It should be noted that many institutions visited have made various changes is their programmes. The principal State body protecting families and minors at risk, INABIF, has introduced several changes in its policies and the trend is now towards "deinstitutionalization".

373. In addition to placement, Peruvian legislation allows other types of arrangement such as custodial care, foster placement and adoption. Custodial care is a transitional arrangement for the protection of an abandoned child or adolescent, whereby a person or persons assume the responsibility for exercising the same rights and obligations as the parents through a judicial decision. This arrangement is constantly monitored by the court which ordered the custodial care.

374. Foster placement is a protective measure of a transitional nature, whereby a person, family or institution becomes responsible for the child or adolescent. Foster placement is limited to families residing in Peru and due consideration must be given to the degree of kinship and affinity or ties of affection with the person, family or institution which assumes this responsibility.

375. The idea of foster placement still needs to be promoted in Peru, since it can be a suitable alternative, particularly in cases of child abuse and abandonment of children over three years of age. Accordingly, one of the functions of the Ombudsmen for children and Adolescents is to promote the establishment of family ties, for which purpose they may provide mediation

between spouses, parents and relatives, setting rules for behaviour, child support and provisional foster placement, provided that there are no judicial proceedings concerning these matters.

376. Admittedly, it has not been possible completely to overcome old prejudices among the population, which make certain people apply for foster children as a means of acquiring domestic servants free of charge. One solution is for the judicial organ to follow up through social workers attached to the court, whose reports will enable the judge to adopt the necessary protective measures and to impose the necessary penalties.

377. Adoption is one of the possibilities for children who have been declared to be abandoned. However, since this is a measure for the protection of children and adolescents, it is supervised by the State. It differs from the other measures by its permanent and final nature, since the adoptee acquires the status of a child of the adopter and ceases to belong to his or her blood family. There have been cases in which, although the identity of the parents was known, because they were drug addicts, had a serious criminal record or were quite unable to care for their children, the principle of the best interests of the children prevailed and a family was found for them so that they did not have to spend their entire childhood in an institution.

378. Types of care other than placement are supervised by the social worker attached to the court, who regularly visits the homes where children are in custodial care or foster placement and reports to the court at six-month intervals.

379. As regards the implementation of article 20 of the Children's and Adolescents' Code, the improvements consist of a new emphasis on total care for children. In other words, the goal is not protection but consideration of the child or adolescent as a legal person, who should be given the same opportunities as any child is given within the family.

380. The aim of the various protective measures (custodial care, foster placement, adoption and placement) is to integrate the child or adolescent in a family which will provide affection, protection and security either temporarily (custodial care, foster placement) or permanently (adoption). As far as placement is concerned, the institutions are aware of the importance of the family and organize themselves into houses: these are home-like units to which children and/or adolescents of various ages are assigned, sometimes with substitute parents who try to create a family setting in which affection, solidarity and mutual help are encouraged.

381. The remaining unresolved difficulties relate to the care of special children. Very few of them are suitable for foster placement, custodial care or adoption and there are no public institutions where they can be placed, since the ones which exist are full to capacity. There is resistance to opening new facilities for placement, because the number of special children abandoned for life is increasing, perhaps because many of them reach physical maturity without overcoming their mental disabilities.

382. Another difficulty may arise because children are not recognized to be legal persons, as advocated under the new approach adopted in the Convention on

the Rights of the Child, and when it is assumed that repression and punishment are the best way of bringing up children. In a reaction to this attitude on the part of adults, children leave home to seek an independent existence on the streets.

383. Legislative provisions have been enacted to tackle the problem at its roots, by dealing with family violence. This was the purpose of Acts Nos. 25763, 26260 and 26788. However, it has not yet been possible to set up a network of services accessible to all those in need in order to enforce the protective measures to be ordered either by judges or by procurators.

384. Through the Division for the Welfare of Children and Adolescents, the Division for Human Development and the Division for the Advancement of Women, and in coordination with governmental and non-governmental agencies, PROMUDEH is involved in activities to strengthen the family as the fundamental unit of society. Various types of programme are being implemented to achieve the economic and social development of the family and improvement of the status of women and of human relations, to directly influence the quality of life of children and adolescents and to prevent new cases of abandonment. At the same time, campaigns are being conducted to warn and alert the public. These campaigns are perhaps insufficient; in any case it is hoped that, since this is a problem of instilling values and providing training, gradual progress will be achieved.

H. Adoption

Legislative measures

385. The Convention on the Rights of the Child, adopted by the United Nations General Assembly on 20 November 1989 and ratified by Peru by Legislative Decision No. 2278 of 3 August 1990, was published in the official gazette El Peruano on 4 August 1990.

386. The Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption, signed by Peru on 16 November 1994, was approved by Legislative Decision No. 26474 of 9 June 1995 and ratified by the Executive Power on 3 September 1995. It entered into force in Peru on 1 January 1996.

387. The Peruvian Political Constitution was promulgated on 29 December 1993 and has been in force since 1 January 1994. Article 4 declares that the State and society are especially mindful to protect children and adolescents in a situation of abandonment. This declaration is vitally important because children and adolescents may be adopted only when they are in a situation of abandonment.

388. The Children's and Adolescents' Code was adopted by Decree Law No. 26102, promulgated on 28 December 1992 and in force since 28 June 1993. By this Code, Peru endorsed the doctrine and principles of the Convention on the Rights of the Child.

389. The Code establishes the governing body of the National System of Total Care for Children and Adolescents and the Technical Secretariat for Adoptions.

which is responsible for proposing, implementing and monitoring the policy with regard to adoptions of children and adolescents in a situation of abandonment.

390. On 29 October 1996, PROMUDEH was established and took over the functions of governing body of the National System of Comprehensive Care for Children and Adolescents. It comprises the Division for the Welfare of Children and Adolescents, which includes the Adoptions Office.

391. Supreme Decree No. 018-93-JUS was amended by Supreme Decree No. 029-93-JUS, published in the official gazette El Peruano on 13 July 1993. It consists of the regulations governing adoption as specified in the Children's and Adolescents' Code. It establishes the goals, functions, structure and services of the Adoptions Office, as well as the procedure and requirements for national and intercountry adoption and its administrative, judicial and post-adoption formalities.

392. The Civil Code was promulgated by Decree Law No. 295 of 24 July 1984 and entered into force on 14 November 1984. It contains nine articles concerning adoption; it should be noted, however, that these rules supplement the provisions of the Children's and Adolescents' Code.

Competent authorities

393. Decree Law No. 25934 ("General Adoption Law"), promulgated on 9 December 1992, established the Technical Secretariat for Adoptions, a dependent organ of the Ministry of the Presidency created on 24 June 1993.

394. The Children's and Adolescents' Code incorporates the General Adoption Law and makes the Technical Secretariat for Adoptions responsible to PROMUDEH. The Adoptions Office is the official agency responsible for proposing, implementing, following up and monitoring national policy concerning the adoption of children and adolescents.

395. The evaluation and selection of the future adoptive parents, whether Peruvians or aliens, as well as the designation of children and adolescents in a situation of abandonment, are within the exclusive competence of the Adoptions Office or of the private or public agencies authorized by the Office. The Adoptions Office is the authority responsible for the administrative and post-adoption formalities for the adoption of children and adolescents in a situation of abandonment.

396. The jurisdictional authority of the State in matters concerning children and adolescents is exercised by the courts dealing with children and adolescents. In accordance with Administrative Decision No. 025-CME-PJ dated 10 January 1996, these are called family courts. The family judge is responsible for approving the adoption of children and adolescents in a situation of abandonment and ascertaining whether there is compatibility between the prospective adopters and the child designated by the Adoptions Office. The family judge is the authority responsible for the judicial formalities concerning the adoption of children and adolescents.

Adoption formalities

397. Adoption in Peru was first legislated in the 1852 Civil Code. In the 1990s, it gained acceptance as one of the ways of permanently solving the problem of abandonment and orphanhood resulting from internal conflicts of a social and/or economic nature and from terrorism. All other measures (substitute mothers, foster placement, etc.) are temporary in nature.

398. The goal of adoption is to integrate in a family children who are in a situation of abandonment or who have been orphaned and to ensure that the abandoned child develops in the same way as any other child in a family. The adoption of Peruvian children and adolescents involves three types of formality: administrative, judicial and post-adoption.

Services for biological mothers and/or fathers who wish to give their children up for adoption

399. As part of the adoption programme, the Adoptions Office provides services to biological fathers and mothers who for various reasons and usually for a combination of reasons (lack of financial security, absentee father, lack of permanent housing, problems of addiction and/or physical or psychological abuse) express a wish to give up their child or children for adoption.

400. In each case, there is a psychological and social evaluation consisting of an interview with the social worker, a home visit and a psychological interview to determine whether the biological mother's decision is valid, final and responsible.

401. The evaluation begins at the time of the child's birth and is organized in such a manner as to offer the biological parents alternatives to adoption. A request is considered to be valid if it is found that there are financial difficulties, health problems, lack of housing and dangerous situations (drug addiction, alcoholism, mental problems).

402. After the evaluation, the child undergoes medical examinations (ELISA test, serological tests and Australian antigen test) in order to establish his or her state of health at the time.

403. Once these requirements (psychological and social evaluation and medical examinations) have been met, the case is submitted to the competent family court, where the biological parents make their declaration. An official request for placement is transmitted to the placement centre. The protection investigation is then initiated in the family court and the role of the Adoptions Office is at an end.

404. If the biological parents change their minds after the child has been placed, the judge shall decide whether or not to return the child to the biological family. If the change is considered to be valid and the child is returned to the biological family, the Adoptions Office follows up to check that the child is receiving what he or she needs for all-round development. In most cases, the findings are not favourable. In one case, the biological mother again asked for her daughter to be put up for adoption. In another case, it was found that the child was not living with the biological mother.

405. If a risky situation is found, the Adoptions Office will report to the court, so that the appropriate measures can be taken bearing in mind the best interests of the child.

Effects of adoption

406. When biological mothers give up their children for adoption, they usually exhibit depressive behaviour afterwards, as a reaction to the separation. In such cases, the technical team gives them guidance and advice to help them overcome their guilt feelings and accept that the decision taken was best for the child.

407. In cases of adoption, filiation with the biological parents is ended (article 377 of the Civil Code), except when the biological father or mother has married and his or her spouse is the adopter (article 145 (a) of the Children's and Adolescents' Code).

408. Article 380 of the Civil Code establishes that adoption is irrevocable. This is true as far as the adoptive parents are concerned, but article 385 of the same Code specifies that, upon reaching 18 years of age, the adopted child may request that the adoption should be nullified during the year following his or her attainment of majority. In this case, the child or adolescent recovers the consanguinial filiation and the relevant birth certificate takes effect.

409. In addition, article 133 of the Children's and Adolescents' Code establishes that, if a future adoptive parent dies before the procedure has been completed and if the procedure has been ratified in the adoption application, the judge will declare the child adopted and the adoption will have retroactive effect to the date of death. This article serves to promote the best interests of the child, since before this legislation there were many cases in which adoption proceedings were delayed for years, during which the child remained in the custody of the adopting couple, and the child was totally unprotected when one of them died.

Intercountry adoption

410. In order to establish a legal framework and to provide legal security to the child or adolescent, it is required that, if aliens or Peruvians not residing in Peru wish to adopt in Peruvian territory, a bilateral agreement must first be concluded on the subject of intercountry adoption (art. 129 of the Children's and Adolescents' Code). It should be mentioned that, in the case of Peruvians residing abroad, the provisions concerning intercountry adoption apply, by interpretation a contrario of the last part of article 129 of the Code, and that aliens who have resided in Peru for more than two years are subject to the provisions governing adoption by Peruvians. It should also be mentioned that adoption by persons residing in the national territory (art. 130 of the Code) takes precedence over intercountry adoption, so that preference is given to applications from Peruvian nationals over foreign adoption applications, always provided that the best interests of the child are protected, since this is the main goal of any legal instrument on the subject of adoption.

411. Decree Law No. 26102, which established the Children's and Adolescents' Code, represented a radical change in legal and social patterns in Peru, because the provisions of the Convention on the Rights of the Child are reproduced and reflected with the aim of improving theory and practice relating to children in an irregular situation. Under this body of rules, children and adolescents are considered as legal persons, enjoying freedoms and entitled to protection. However, a legal provision is not sufficient to alter a vast and complex social reality, which is known not only to those who work on children's problems and are able to detect gaps and contradictions.

412. In accordance with article 137 of the Children's and Adolescents' Code, the only public agency authorized to organize adoption programmes was the former Technical Secretariat for Adoptions, now the Adoptions Office. However, provision is made in Ministerial Decision No. 459-94-PRES for the possibility of other national agencies to work in the area of adoption, although so far no other agency has been authorized to do so.

413. In order to safeguard the rights of Peruvian children and adolescents, they may be adopted only by applicants from countries with which the Peruvian State or the authorized public agency has concluded an agreement. This provides legal security and ensures the appropriate framework for the adoption process. Similarly, a prior evaluation is made of the documentation required from each agency interested in concluding an agreement on intercountry adoption and care is taken to establish the agencies' suitability as well as the compatibility of the legislation of the country in which the agency or association interested in an agreement is domiciled.

414. Before an agreement or arrangement is concluded, it is established that the legislation of the foreign country does not infringe the rights of children and adolescents and that their adoption is recognized as full and irrevocable in accordance with article 128 of Decree Law No. 26102 (Children's and Adolescents' Code).

415. Any agreement on intercountry adoption must include provisions on: observance of Peruvian legislation by the signatory agency, and its liability; obligation of the entity to provide information on the legislation of the country which it represents, as well as on any amendments thereto; recommendations on the selection of a suitable couple or prospective adopter for the adoption; documentation certifying the naturalization of the children and/or adolescents given up for adoption; obligation to submit post-adoption reports on the adopted child every six months for a period of four years. After the adoption, these reports by specialists are intended to document the integration of the minor; and possibility of a specialist evaluating in situ the integration of the child in his or her adoptive home.

416. Because of the existence of social and cultural problems and conflicts of competence and interest, there is an urgent need to update and unify the international law relating to adoptions. It is in this context generally that article 2087 of the Civil Code attempts to create a framework. However, the specific provisions refer to international agreements, such as those concluded with various States or foreign agencies. These agreements basically formalize and/or regularize the process of intercountry adoption, subject to the provisions of Peruvian national legislation and the National System of Total Care for Children and Adolescents. The goal is to encourage the adoption of "difficult children" and to adopt and verify the adaptation and integration of children and/or adolescents in their new home and environment, through compulsory post-adoption reports.

417. In order to permit adoption by persons residing abroad, bilateral agreements have been concluded with various Governments and agencies, and authorizations have been issued to some Spanish decentralized public agencies.

418. With the exception of intergovernmental agreements (of indefinite duration), all bilateral agreements and/or arrangements for the conduct of intercountry adoption proceedings are concluded for a period of two years, so that the work of the collaborating agency can be evaluated.

419. The above-mentioned "arrangements" are guidelines concluded with collaborating adoption agencies which have previously been designated as competent in their country of origin. Following reassessment by the Adoptions Office, they are empowered or authorized to engage in actions leading to adoption in Peru. The "arrangements" are important because their clauses are similar in content to those included in agreements concerning intercountry adoption: in other words, they refer to scope, limitations and liability in connection with the work of the agencies empowered.

Statistics on adoptions in Peru by Peruvians and aliens

420. It has been found that the largest number of adoption applications comes from potential adopters of Spanish nationality, because of the facilities granted to them as a result of the conclusion of agreements between Peru and Spanish representative agencies. Spaniards' preference for Peruvian children can be explained by their identification with Peru and by the similarity of customs, beliefs and language. It appears that Peru does not enjoy any preference in the case of other foreign countries; their applications are fewer because of the costs involved in adoption proceedings and the language difference.

421. It is also observed that adoptions by Peruvian nationals are more numerous than by aliens, because Peruvian law specifies that national adoptions take precedence over intercountry adoptions. Between 1994 and 1996, there were 521 adoptions, of which 341 were national and 180 were intercountry.

Table VII.5

Peru: adoptions of children, by country of origin of adopters

Country of adopter	1994	1995	1996	Total 1994-1996
United States	8	14	11	33
Italy	1	8	10	19
France	0	0	1	1
Canada	5	16	8	29
Luxembourg	4	7	16	27
Spain	0	2	67	69
Denmark	0	0	1	1
Germany	0	0	1	1
Peru	53	134	154	341
Total	71	181	269	521

Source: Adoptions Office.

Table VII.6

Peru: children adopted, by sex, in various departments, 1994-1996

Department	1994		1995		1996		1994-1996
	Male	Female	Male	Female	Male	Female	
Amazonas	0	0	0	0	0	0	0
Ancash	1	0	2	2	6	1	12
Apurímac	0	0	0	0	0	0	0
Arequipa	0	0	13	11	18	16	58
Ayacucho	3	1	8	9	7	10	38
Cajamarca	2	0	0	0	1	0	3
Callao	0	0	2	2	11	9	24
Cuzco	0	0	3	6	8	13	30
Huancavelica	0	0	0	0	0	0	0
Huánuco	0	0	0	0	4	2	6
Ica	0	0	0	0	0	0	0
Junín	0	0	0	1	0	0	1
La Libertad	0	0	0	0	0	0	0
Lambayeque	0	0	7	7	12	7	33
Lima	35	29	64	32	59	50	269
Loreto	0	0	0	0	2	0	2
Madre de Dios	0	0	0	0	0	0	0
Moquegua	0	0	1	1	1	0	3
Pasco	0	0	0	0	0	0	0
Piura	0	0	2	2	6	4	14
Puno	0	0	1	3	7	2	13
San Martín	0	0	0	0	1	0	1
Tacna	0	0	0	0	1	0	1
Tumbes	0	0	0	0	0	0	0
Ucayali	0	0	2	0	6	5	13
Total	41	30	105	76	150	119	521

Source: Adoptions Office.

Difficulties

422. One difficulty arose in connection with the requirement under the Children's and Adolescents' Code that all institutions where children and adolescents are living must report to the competent family court on minors living there for whom no protection investigation has been initiated. Yet many of them have failed to meet this obligation, so that many children who could have been brought into an adoption programme remain there for a very long or indefinite period, because of the existence of private interests or institutional conflicts. In organizing the central register of agencies working for children and adolescents, the Division for the Welfare of Children and Adolescents makes supervisory visits to centres in order to find out how many

children and adolescents are housed there, to check the quality of the care provided to them and to verify that a protection investigation has been initiated for all of them.

423. Another difficulty is the fact that potential adopters reject problem children or disabled children. In 1995, 180 children were put up for adoption, but not all of them were accepted initially. After being proposed as many as three more times, many of them still remain in a transitional home. The reasons why children are rejected are as follows:

- Parental history of mental illness, drugs or alcoholism;
- Epilepsy, Down syndrome, hydrocephalus, microcephaly, dyslalia, etc. in the children;
- Retardation and backwardness at any level in the areas of language and psychomotor development;
- History of first and second degree malnutrition;
- Aftermath of physical accidents such as burns, missing limb, etc.;
- Above four years of age;
- Behavioural problems which may prevent children from adapting to their new home; and
- Very marked physical traits indicating indigenous or negroid antecedents.

424. The staff of the Adoptions Office have little information about children likely to be declared in a situation of abandonment, although there are couples on waiting lists, many of whom were found to be suitable adoptive parents as far back as August 1996. These couples are anxious and are continually contacting the Office. In Lima, this problem has been solved by recruiting facilitators to accelerate the protection investigations. The problem has still not been eliminated in inland areas.

425. Foreign potential adopters are inconvenienced when they have to remain in Peru for longer than they were told by the Adoptions Office. This happens because of the large amount of legal work required and because many family judges in the provinces are not aware of the procedures to be followed. The situation is even worse in provinces where there are no decentralized offices.

Achievements

426. Achievements include:

- Installation and establishment of the pilot transitional home of the former Technical Secretariat for Adoptions, now the Adoptions Office, and training of the centre's staff in total care of children;

- Conclusion of international agreements for adoptions by aliens, providing legal security and ensuring a suitable framework for the adoption process; and

- Acceleration of legal procedures for the protection investigation in courts through facilitators from the Adoptions Office, so that investigations can be concluded in order to locate the children's parents or return the children t the centres. Between 1994 and June 1997, a total of 1,015 inve..igations were conducted in Lima and the provinces, culminating in writs of abandonment.

Table VII.7

Peru: writs of abandonment, 1994-1997

Year	Lima	Provinces	Total
1994	109	103	212
1995	134	172	306
1996	122	125	247
1997 (up to June)	150	N/A	150
Total	515	400	915

427. To date, seven decentralized adoptions offices have been set up, which are competent to implement the adoption programme at the regional level, as shown in table VII.8.

Table VII.8

Peru: decentralized adoptions offices

Region	Headquarters	Date of establishment
Arequipa	Arequipa	27-10-1994
Grau	Piura	02-06-1995
Inka	Cuzco	27-10-1994
Los Libertadores Wari	Ayacucho	27-10-1994
Moquegua-Tacna Puno	Puno	25-01-1995
Nor Oriental del Marañón*	Chiclayo	27-10-1994
Ucayalí	Pucallpa	24-04-1995

Source: Adoptions Office.

* Authorized to implement the adoption programme in the La Libertad region.

428. Other achievements are:

- Organization of four workshops for prospective adopters and adoptive parents, each attended by an average of 60 people, using participatory techniques;

- Research by PROMUDEH on the social, economic and cultural reasons why children are given up for adoption or abandoned by parents in the city of Lima and Callao. The findings showed that, of a total sample of 300 biological mothers, 94 per cent of those who were well informed about what it means to give up a child for adoption decided not to do so. The remaining 6 per cent gave up their children because of poverty or because they had given birth to an unwanted child as a result of rape;

- Ongoing coordination between the authorities of the Judiciary, the Public Prosecutor's Department and the Peruvian National Police.

429. The goals for the future are: establishment of decentralized adoptions offices in the regions which still do not have them, such as the Loreto region and other regions; campaigns to encourage the adoption of sick or disabled adolescents and children; creation of the single register of adoptions; and coordination of the conclusion of agreements with hospitals and other facilities for the recovery of sick children.

I. Regular review of conditions of placement

430. When placement has been ordered as a protective measure, abandoned children and adolescents are evaluated at total care centres by the professional teams at each facility. If necessary, special evaluations are conducted and are all recorded in reports submitted to the courts in which the protection investigation is being conducted.

431. The authorities competent to request reports on the situation and development of children and adolescents placed in the various private and State facilities are the family judges and the family procurators who are conducting the protection investigation and the PROMUDEH Division for the Welfare of Children and Adolescents.

432. Reports on the situation and development of the children and adolescents are required from the centres at six-month intervals, unless the children are receiving special treatment, in which case constant information must be given to the court until such time as the problem which necessitated the treatment has been resolved.

433. Placement is the measure of last resort and is used solely when it is the only one possible or when it would be more favourable to the child or adolescent. In addition, it is assumed that placement is a transitional measure leading to integration in the child's own family or in a substitute family.

434. One achievement pursuant to article 10 of the Children's and Adolescents' Code, as a result of the latest reforms in INABIF, is the periodic evaluation

reports on children and adolescents in placement. The reports are now more frequent and more detailed than previously. Among the difficulties which unfortunately still exist is the shortage of technical personnel at the centres and the fact that some non-governmental organizations do not send their periodic reports, despite repeated requests from the courts. Lastly, the courts lack the means to force non-governmental organizations to comply with this requirement.

J. Abuse and neglect; physical and psychological recovery and social reintegration

435. Reference has often been made to the culture of violence and child abuse which exists in Peru. According to this culture, abuse is a natural method of correction and education, and even children themselves accept this concept. The special police delegations receive hundreds of complaints of domestic violence, but not all are brought before the judicial authority, sometimes because the victim is afraid, sometimes because the victim is financially dependent on the aggressor and sometimes for a series of unknown reasons. However, it has at least been possible partially to overcome the barriers in the home which were limiting the number of possible complaints.

436. In such cases, the aim of the judicial intervention is, firstly, to remove the victim, who will be duly evaluated and receive therapy, if appropriate. A complaints against the aggressor will be submitted to the competent penal authority.

437. No specific procedures have been established for complaints. However, for cases of ill-treatment or any type of violence, abuse and/or neglect, policy guidelines have been issued to the National Police which describe procedures for the receipt of complaints made directly by children and adolescents. Procurators' offices may also receive complaints directly from the child or through his or her legal representative.

438. Once the accuracy of the complaint has been verified, the judge fixes a sum for civil reparation. If it is desired to request such reparation in civil proceedings, as actual compensation, this will have to be done through a legal representative.

439. The National Police engages in various activities designed to promote the physical and psychological recovery and the reintegration of children and adolescents. It organizes social programmes of prevention and protection, among which mention may be made of: the "Colibrí-PNP" programme, aimed at street children and adolescents who work, in order to protect them from abuse and exploitation.

Table VII.9

Peru: activities under the Colibrí programme, 1992-1997

Activities	1992	1993	1994	1995	1996	1997	Beneficiaries
Camps	1	2	3	4	5	2	780
Competitions*	4	6	5	7	0	3	230
Visits**	-	1	3	3	4	2	580
Events***	-	-	-	1	-	1	250
Sports festivals	1	2	3	4	2	1	1,650
Programme anniversary	-	-	4	6	7	8	700
Study vacations	1	1	2	2	2	1	1,430
Seminar - workshops	-	-	1	5	2	1	150
Outings	1	-	3	6	4	2	200
Informal lunches	-	-	1	1	2	1	220
Total	8	12	25	39	34	22	6,190

Source: DIVIPOLNA.

* Painting, drawing and mathematics competitions.
** Visits to museums, factories, recreation centres, archeological ruins.
*** Meetings are held nation-wide.

440. The "GAVIOTA - PNP" programme, designed specifically for street children and aimed at their reinsertion in society and the labour market, currently provides lodgings to 50 adolescent boys and girls.

Table VII.10

Peru: activities under the Gaviota programme, 1995-1997

Activity	1995	1996	1997	Beneficiaries
Camps	2	3	1	40
Outings	-	3	4	30
Competitions*	-	1	3	40
Visits	-	3	1	45
Total	2	10	9	155

Source: DIVIPOLNA.

* Painting, drawing and sculpting competitions.

441. The social programmes implemented by the National Police for children and adolescents achieved the following results: the "COLIBRÍ-PNP" programme, with activities designed to boost self-esteem, freedom and self-confidence, knowledge of their rights, duties and obligations as children, reinsertion in school and improvement of performance at school, complete elimination of use of inhalants and appreciation of the National Police with its new image.

442. The "Clubs of Children and Adolescents on the Side of the Police" organize activities designed to strengthen ties of friendship and solidarity in the neighbourhood, improve support for the community and the National Police and inform children and adolescents of their rights, freedoms and duties.

443. The aim of the "school police" is to reduce violence on and off school premises, to teach children to respect the authority of their fellow students as a sign of order and discipline, to reduce accidents on the way to and from school and to improve the appearance of school premises.

444. The "GAVIOTA-PNP" programme is aimed at achieving the total reinsertion in society of 40 per cent of its members, who learn a trade (carpentry, bread making, electrical work, ceramics and apparel industries), so that they can develop their potential as adolescents and never again use the street for socialization.

445. In 1996, the Ministry of Justice set up a hot line for complaints of family violence. Legal advice was provided and complaints were transmitted to court-appointed defence lawyers in family courts and to the people's legal advice bureaux for action. When these services were transferred to PROMUDEH, the hot line was abandoned the same year.

446. Currently PROMUDEH has a telephone service providing help and guidance for minors, with the primary aim of enabling them to make complaints and receive advice. This gives access to a free service and to information in cases of child abuse.

447. In addition, PROMUDEH is trying to provide a central clearing-house for the activities of the sectors dealing with child abuse, in order to avoid duplication of proposals, meetings and activities. The approach to the problem of child abuse was mainly characterized by isolated activity in the various sectors each responsible for one aspect of the problem. There was no overall view of the problem and, above all, there was often duplication of procedures. In other cases there were gaps: for example, there was no single system for registering cases, which made it impossible to evaluate the real scope and characteristics of the problem, and no system of follow-up to ensure that every case opened was properly closed.

448. Accordingly, the PROMUDEH Division for the Welfare of Children and Adolescents convened a meeting of representatives of the sectors involved in the detection, processing and solution of cases of child abuse in metropolitan Lima in order to set up networks for dealing with child abuse. A directory of concerned agencies has now been prepared and there are individual entries for cases which can be used by each agency and monthly entries so that PROMUDEH can consolidate the information. Networks have been set up in the districts of El Agustino, Comas, Villa El Salvador and Lima and will be set up in San Juan de

Lurigancho. Inter-agency training and awareness workshops have been held with the participation of representatives of governmental, non-governmental and community organizations.

449. Support for the physical and psychological recovery and social reintegration of minors who are abandoned, exploited or abused is provided by specialized agencies such as the Mental Health Institute of the Ministry of Health, which has external advice bureaux. The expert in forensic medicine in each agency first makes a diagnosis so that the measure most appropriate to each case can be adopted.

Mental health to promote the rights of the child

450. The National Mental Health Programme was launched in 1994. Its main focus is improvement of the mental health of children and adolescents, according to the guidelines in the National Mental Health Plan (July 1991), since they constitute a vulnerable group.

451. All forms of abuse by parents, teachers, relatives and neighbours are showing an alarming increase, sometimes leading the offender to commit homicide or the adolescent to commit suicide. Adolescent suicide represents an extreme reaction to the adolescents' inability to bear the shame and rejection by family or society, when they have been the victims of violations or severe emotional or physical abuse. There are no reliable statistics to document the extent of this phenomenon. To deal with this problem the National Mental Health Programme has set up child health abuse units (NAMIS). A multidisciplinary team at a regional or general hospital receives guidance and training so that it can provide total care for abused children and adolescents and for their families. Table VII.11 shows the number of NAMIS in the various departments.

Table VII.11

Peru: child health abuse units, by city

City	Number of NAMIS
Tacna	1
Trujillo	1
Chiclayo	1
Cuzco	1
Chimbote	2
Arequipa	2
Lima	7
Total	15

452. The child abuse registers kept at the various hospitals in Peru during 1995 and 1996 show an increase (sometimes as much as a sixfold increase) in the number of cases. This is because people are now more aware that they have the possibility and the authority to make complaints and because the project has been publicized by the MAMIS teams and the hospitals.

Table VII.12

Peru: cases of child abuse recorded in MAMIS, 1995-1996

Hospital	MAMIS inaugurated	Number of cases	
		1995	1996
Hipolito Unánue	February 1995	129	288
Child Health Institute	March 1995	118	280
Daniel A. Carrion	August 1995	27	137
María Auxiliadora	January 1996	40	257
Cayetano Heredia	February 1996	16	100
Juan Pablo II	August 1996	10	
Victor Larco Herrera	May 1997	-	-

Source: Ministry of Health.

453. Each MAMIS team sets up an oversight committee for abused children and adolescents, which organizes awareness and training events within its facility and in the community. They try to target leaders, through institutions and organized groups.

VIII. BASIC HEALTH AND WELFARE

454. Although its population is mainly urban (70 per cent), Peru has demographic and geographical characteristics which complicate the provision of social services: scattered population, poor agricultural land, etc. For this reason, social investment funds have been created with the twofold aim of reducing existing poverty (current expenditure) and creating the infrastructure for sustained development (investment expenditure). Although the social needs are vast and the available resources are scarce, the plans and programmes implemented have been effective as regards results and achievements, if not entirely efficient.

455. As part of the Prioritized Strategy for the Relief of Severe Poverty,16/ the Peruvian Government has proposed to reduce severe poverty by

16/ Approved by Ministerial Decision No. 262-96-PRES.

half by the year 2000. This meant that 40 per cent of the national budget of Peru had to be allocated to the social sector. The strategy seeks to promote greater equity, through social investment to expand opportunities and skills in the poorest sectors of Peru, especially among the most vulnerable groups. In recent years, there has been a considerable increase in annual per capita social investment: US$ 158 in 1996 compared with the modest amount of US$ 12 in 1990.

456. During this decade, the main focus of national health policy has been expansion of coverage and access to health services in the context of efficiency, quality and equity, so as to reach minimum qualitative and quantitative standards for the delivery of regular services and to ensure primary care. There has been an improvement in the infrastructure, funding and local management of the prioritized health centres. As soon as the location of basic health needs was known, a total care strategy provided basic health services to users, with the goal of universal application of a basic health package.

457. With the implementation of the Prioritized Programme of Basic Health, various improvements have been introduced in health care services: extended hours, improvement of physical infrastructure, training of health workers and intensification of activities outside the health facilities. The results of these improvements include: reactivation of the operational and service infrastructure at 4,422 facilities and incorporation of 544 facilities in the arrangement for shared administration in the local community (CLAS).

458. This strategy has been implemented through the various national programmes, including the expanded programme of immunization and reduction of diarrhoeal diseases and cholera, the programme for the reduction of acute respiratory infections, the national programme for the eradication of iodine deficiency disorders, programmes of food aid (particularly for children under three years of age, pregnant women and nursing mothers), the emergency plan for the reduction of maternal mortality and the national programme of reproductive health and family planning.

459. The national plans of action for children reflect the commitment of the Peruvian Government and of civil society to promote the attainment of the goals for this decade established at the 1990 World Summit for Children and constitute the Government's instruments of social policy. The 1992-1995 National Plan of Action for Children was a significant instrument defining the health services provided to the child population by the Ministry of Health and other entities in the public sector. The 1996-2000 National Plan of Action for Children 17/ is also part of the national strategy, since poverty relief extends to Peruvian children.

460. In this connection, the main successes achieved are attributable to the increase in the Peruvian Government's spending on health in recent years. This social investment progressed from a negative rate of minus 14 per cent between 1985 and 1990 to a rate of 22 per cent between 1991 and 1995. There is a continuous increase in budgetary allocations for the social sectors of health and education. Expenditure on health more than doubled, from 4 per cent to

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17/ PNAI, approved by Supreme Decree No. 003-97-PROMUDEH in May 1997.

10 per cent of total expenditure, and in the current decade rose from 1.1 per cent to almost 3 per cent of gross domestic produce (GDP). Improvements were also made in the management of health programmes and services thanks to the process of sectoral reform, which in 1994 allocated US$ 90 million to the programme "Prioritizing social spending on health", now called "Basic health for all".

461. In recent years, external assistance to the health sector has also increased. A total of over 200 million dollars has been contributed to the "Programme to strengthen health services" and the projects "Health and basic nutrition" and "Health by the year 2000" financed by the Inter-American Development Bank, the World Bank and the Agency for International Development respectively.

462. A study of the processes followed in the implementation of plans and programmes of basic health and welfare shows that it is possible to make them more efficient and to improve the organization and channelling of the available resources, particularly in terms of the suitability and advisability of the decisions taken and the permanent and periodic internal and interagency coordination. These observations do not claim to be original but they are realistic and will reduce duplication and administrative red tape and prevent frustration among the officials involved. It has been found that there is still a shortage of skilled personnel in regional and departmental offices to meet requirements and administer budgets in direct and objective relationship to identified social needs (what are the needs, who and where are the people in need and how much money is needed to attend to them). In addition, in 1997 the Ministry of Health launched a pilot programme of total care consisting of a specific basic package provided mainly at certain first-level facilities including health centres and units.

463. Organizational arrangements are not covered in this chapter. However, in this connection it may be noted that the health sector has initiated a serious process of reform in order to improve efficiency and effectiveness, separating the financing function from the function of providing health services and introducing other changes. One objective of the reform process is to offer alternative solutions to the serious deficiencies in the existing health system, such as the fact that only 25 per cent of the national population is covered by any form of health insurance. Much of this coverage (about 20.5 per cent) is provided by the Peruvian Social Security Institute (IPSS).

464. A description is given below of the various programmes implemented in the area of basic health and welfare. It will cover inter alia the approach adopted in the treatment and rehabilitation of children, the evaluation of results using child mortality and morbidity indicators, the measures adopted to reduce perinatal and infant mortality, the institutions created to improve access to water and sanitation, the coverage achieved by programmes to promote children's growth and development (efforts to combat disease and malnutrition) and other health-related programmes such as the family planning and/or reproductive health programme and the right of children to be protected from disease through free school insurance.

A. Handicapped children and adolescents

Situation of handicapped or disabled children

465. This section refers to the situation of mentally or physically handicapped children and the measures taken to ensure that they are able to exercise their rights without discrimination in order to acquire a better quality of life.

466. The National Health Policy Plan includes a programme for the handicapped, especially children and adolescents. In this connection, seeking information on the situation of handicapped persons in Peru, the Government conducted a survey in March 1993 to determine the prevalence of impairments, disabilities and handicaps in Peru. The results show the following situation for children under 16 years of age: impairments, 40.3 per cent; disabilities, 20.9 per cent; and handicaps, 7.6 per cent.

467. According to data from the 1993 population and housing census, the handicapped population numbered 288,526, of whom 28 per cent were between 0 and 20 years of age. Almost one third of the disabled children suffered from blindness, followed by those suffering from invalidity (19 per cent) and from retardation (18.9 per cent). More than half of the children under five years of age suffered from blindness and almost one quarter of the adolescents between 10 and 18 years of age suffered from retardation or invalidity. Disability was more frequent among males, particularly in the case of children over five years of age and adolescents.18/

Table VIII.1

Peru: disabled population, by age groups, 1993

Age	National	Blindness	Deafness	Mutism	Retardation	Mental	Invalidity	Other disturbance
0 to 19	79,922	24,792	5,016	7,946	15,081	6,329	15,214	5,446
0 to 4	19,292	8,184	708	1,466	1,215	509	2,347	840
5 to 9	18,466	5,416	1,161	2,218	3,431	1,243	3,318	1,475
10 to 14	24,525	6,179	1,700	2,334	5,325	2,260	5,098	1,588
15 to 19	21,639	4,814	1,451	1,929	5,110	2,317	4,451	1,543
National	288,526	60,175	41,452	19,287	35,737	28,255	80,928	22,692
Relative distribution								
0 to 19	27.7	41.2	12.1	41.2	42.2	22.4	18.8	24.0
0 to 4	5.3	13.6	1.7	7.6	3.4	1.8	2.9	3.7
5 to 9	6.4	9.0	2.8	11.5	9.6	4.4	4.1	6.5
10 to 14	8.5	10.6	4.1	12.1	14.9	8.0	6.3	7.0
15 to 19	7.5	8.0	3.5	10.0	14.3	8.2	5.5	6.8

Treatment and rehabilitation measures

468. The strategy of community-based rehabilitation began to focus on intervention to deal with these problems, particularly with regard to detection,

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18/ National Population and Housing Census, 1993.

intervention and timely referral of cases detected. Within the Ministry of Health, coordination was established with the growth and development subprogramme in order to train staff to provide care and timely referrals to the appropriate rehabilitation services in high-risk zones.

469. A "Child Development Profile" was developed to measure children's general development in our society, in order to detect functional or organic problems. This instrument, which is easy to use and inexpensive, incorporates criteria and global requirements for rapid evaluation. General physicians are encouraged to use it for purposes of detection, rapid intervention and timely referral.

470. The rehabilitation component of health programmes is being gradually incorporated into the routine activities of health facilities at second and third levels of complexity - in other words, in hospitals and national institutes. In recent years, coverage has been extended. Despite the efforts made, the potential and actual demand from users cannot be entirely met and priorities must be set. Accordingly, taking into account the most depressed and poorest areas, rehabilitation services are being provided in the regions of the Andes (Ayacucho, Huancavelica, Apurimac), in the jungle region (Ucayali, Madre de Dios, Huánuco, Amazonas) and in the frontier zones (Tumbes), with emphasis on referrals, which has resulted in an improvement in the patient referral system.

471. Nine establishments have been equipped to provide rehabilitation to disabled children in the departments of La Libertad, Lambayeque, Ancash, Arequipa, Tacna, Puno, Cuzco, Junín and Cajamarca.

472. As part of the strategy of community-based rehabilitation, coordination between the education and health sectors is channelled towards pilot services in which information on disability, prevention and detection is provided by teachers and school facilitators. In addition, special education centres are giving refresher courses to teachers and making better use of the infrastructure and installed capacity for the rehabilitation of disabled children.

473. In order to improve the dissemination of information about methods of rehabilitation, teaching and vocational training, the following measures have been adopted:

- A rehabilitation manual has been prepared for general physicians, with special emphasis on detection and early intervention in cases of developmental, learning and language disabilities and of mental deficiencies, as well as postural defects in children. This manual complements the information given to medical students;

- Refresher training in intellectual, learning and communication disabilities has been provided to 80 per cent of chiefs of provincial rehabilitation services, in order to expand the supply of such services; and

- A test has been designed to evaluate the development of the child from 0 to 30 months of age, with which the profile of the healthy child in our society can be measured and functional and organic problems can be detected. It is easy to use and inexpensive and incorporates criteria and global requirements for rapid and large-scale evaluation.

474. In order to ensure the effective evaluation and follow-up of cases, the Ministry of Health has a system of registering disabilities, which includes the system of epidemiological monitoring. This system produces figures on certain

disabilities of children, facilitating a more rational planning of resources and allowing the necessary recommendations to be made concerning prevention and type of instruction. The system also permits the registration, identification and follow-up of disabled persons.

475. It has been decided in the education sector that disabled children should be educated in regular basic education programmes, in order to facilitate their integration in society. However, there are still not enough special education teachers in all Peruvian schools.

476. Similarly, every effort is made, through individual contact with school heads, to mainstream disabled children by placing them in regular classes. The aim is to overcome ignorance about the potential for integration of disabled children.

477. For its part, the Peruvian Sports Institute, which is affiliated with PROMUDEH, is supporting sports activities for disabled children. However, coordination must be improved with the bodies responsible for the access to sports and recreation for these children. Although progress has been made in the construction of access ramps and facilities for their movement, some architectural and social barriers still exist which affect disabled children.

478. An agreement has been concluded with the Peruvian Foundation for Children for detection and intervention in the rehabilitation of disabled children residing in children's villages, including training of substitute mothers and aunts. This is an initial pilot programme under which disabled children who have been abandoned can be absorbed in the appropriate institutions.

479. The first directory of rehabilitation services and special education centres, which also lists some associations of disabled persons, has been published. This directory facilitates the coordination and identification of institutions working in this field, whose principal concern is to improve the situation of handicapped persons.

480. Peruvian universities have training courses for rehabilitation specialists, although they are insufficient in number. Human resource training facilities are being asked to increase training opportunities for such specialists, particularly at the provincial universities. These efforts must be continued with the goal of expanding specialist training and promoting more comprehensive training at the undergraduate level, emphasizing disability and rehabilitation. These specialists are needed in the rehabilitation units of hospitals in the public sector.

481. An effort is being made to determine the cost of "treatment and rehabilitation packages" for various types of disability, for the purpose of preparing budget proposals for any type of financing, whether for cases of indigence or services to be included in a programme of universal insurance.

482. Action to integrate the disabled is being coordinated with the education sector. Since 1992, there has been a programme for mainstreaming disabled children in general or standard schools, in the departments of Lima-Callao, Arequipa, Ica and Cajamarca. Regular schools are selected for this programme. The aim is to achieve the acceptance and inclusion of disabled children in the regular education system. These are children with inter alia mental deficiencies, hypoacusia, vision problems with cerebral paralysis, learning problems and motor deficiencies with Down syndrome.

483. The following actions will be required in order to attain this goal:

(a) Selection of regular early and primary schools which possess not only suitable materials but also, above all, staff with a favourable attitude towards disability;

(b) Training and selection of volunteer teachers, who must be able to provide an educational response to various disabilities;

(c) Awareness campaigns directed at teachers and parents. Also information meetings for health facilities, teacher training colleges and community centres to provide information about the potential of disabled children;

(d) Think tanks with adolescents, parents and the community to promote attitudinal change and personal growth. These not only help disabled children but also foster understanding and support for the disabled among participants.

484. Disabled children attend special schools staffed by skilled and trained personnel. However, many remain outside the public special education schools because there are not enough of these schools.

485. Efforts are currently being made to allow a larger number of disabled children to attend regular schools on the same footing as other pupils in activities scheduled by the school such as sports, dances, Red Cross activities, guessing games, singing, acting and school orchestras.

486. As part of the Peruvian Government's overall policy and through the Ministry of Education, legal provisions and guidelines have been enacted to ensure the provision of education services to these disabled children. In 1971, the Education Reform Act created the special education module (Decree Law No. 19326) within the Peruvian education system and established the Directorate of Special Education as the technical and normative body responsible for formulating policy for the education module and the corresponding technical guidelines. This service was created in order to mainstream disabled persons in the social life of the country, in its widest sense, both in the area of work and among the person's own family and friends. The greatest possible personal development is sought, recognition of the rights of the disabled is enhanced and the rights of the child are publicized.

487. In view of the need for the development and integration of the disabled, it has been decided that they should be brought forward and that their rights should be publicized. Not only should they be diagnosed, sheltered, maintained and protected; the approach today is to train them, provide them with appropriate skills and boost their self-esteem, so that they can thrive on their own.

488. It is believed that the strategies used were not the best to achieve the participation of parents, who usually still remain on the fringe of the education process. Regrettably, previous campaigns to prevent disability and publicize this module almost always depicted the disabled as second-class citizens. In addition, the creation of workshops at special education centres often encourages the disabled to remain in the centres indefinitely. There is still uncertainty about including the social and family context in which children and adolescents evolve and about the possibilities of involving them in the services supplied and demanded on the market, as mechanisms to promote employment practices which will ensure their permanent integration in society.

489. In view of the limitations and difficulties encountered, guidelines have been evolved for a new approach in special education programmes and centres

reflecting the basic concept that the raison d'être of the centres is the disabled child and his or her insertion in social life. Accordingly, there are two underlying themes in the planning and implementation of this programme. The first is the enhancement of special education, which will no longer be a parallel track in the education system, and the second is that special education must really fulfil its purpose of achieving the integration of disabled children in the family, society and the labour market.

490. There are still many shortcomings, particularly in the provinces, in the care given to disabled children. At the workshops on the implementation of the Convention on the Rights of the Child held in the cities of Cajamarca, Iquitos and Arequipa, reference was made to the need to focus on their education and preparation for life - in other words, to deal with one of the most important aspects for their incorporation in society through training for work, so that social insertion can be complete and autonomous.

491. The PROMUDEH Division for Human Development is preparing draft guidelines for the formulation of the National Disability Plan, with the aim of decreasing the incidence and prevalence of disabilities and achieving the complete social integration of disabled persons, with the active participation of the community.

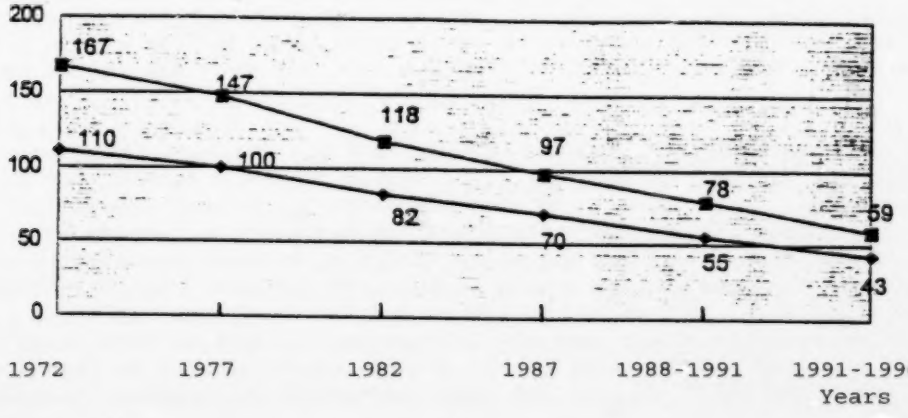
B. Health and health services

Infant mortality and morbidity

492. In the area of health, important changes have been made in Peru as regards child health. Infant mortality has shown a very significant and sustained decline. It was estimated at 55 deaths per thousand live births in 1991 and at 43 deaths per thousand live births in 1996, which means that almost 30,000 children died before reaching the age of one. It is estimated that mortality under the age of five dropped from 78 per thousand live births in 1991 to 65 in 1996, which means that nearly 40,000 children under five years of age died each year.

Figure 1

Peru: trends in infant mortality and mortality of children under five, 1972-1996



Source: Child mortality, Peru, CELADE-INEI. National Population Council, 1993. INEI, ENDES II (1991-1992) and ENDES III (1993).

493. The greatest reduction in mortality in the past 23 years occurred among children under five, for whom the decrease was 60 per cent compared with 55 per cent for infant mortality. However, in view of the social and demographic diversity in Peru, national averages conceal considerable differences between departments and regions.19/

494. The results of ENDES III, conducted in 1996, show that, while in Lima mortality was 26 per thousand live births, in other departments such as Huancavelica the rate was still 109, which is approximately the same as three decades ago in Peru.20/

495. The significant reduction in causes of infant morbidity and mortality was the result of various converging actions taken through the different institutions in the public sector. As various programmes of the Ministry of Health are implemented, the living conditions of the population, especially children, are improving.

496. There is a very large difference between infant mortality in the urban areas and the rural areas. In rural areas, the mortality is double the urban rate: 71 compared with 35 per thousand live births; in addition, the largest decrease in the past decade occurred in urban areas (35 per cent compared with 30 per cent for rural areas), so that the differences between urban and rural areas are more marked.

497. Research has shown that one of the variables most closely correlated with infant and child mortality is the mother's education level. The data from ENDES 1996 show that, when women are uneducated, the probability of children dying under the age of five is four times greater (114 per thousand live births) than when the mothers have some education (26 per thousand live births).

498. Another marked change in Peru is related to the causes of death of children under one year of age. In the last decade, the main causes of death were acute respiratory infections and malnutrition; now they are perinatal diseases (33 per cent), closely followed by acute respiratory infections. This change in the relative importance of causes of death has considerable implications for the focus of health policy with the goal of reducing infant mortality. To reduce infant mortality it will therefore be crucial to improve the quality of health services and maternal care, especially pre-natal check-ups and care during childbirth. Measures will also have to be taken to ensure that children remain in school until they have completed their secondary education, especially in the departments with higher infant mortality rates, since the education of the mother influences the health of the children.

Measures to reduce perinatal and infant mortality

499. One of the goals of the poverty relief strategy put into effect by the Government in 1993 and 1995 was to meet the pressing needs of the country's most

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19/ INEI-UNICEF, State of children, adolescents and women in Peru in 1996, Lima 1996.

20/ INEI, Principal report of the 1996 Population and Family Health Survey, Lima 1997.

vulnerable population and to lay the foundations for the existing strategy of extending the poverty relief strategy into the medium term.

500. Within the framework of this strategy, the Ministry of the Presidency was established. It includes the various institutions implementing social programmes. The Social Compensation and Development Fund (FONCODES) was also created to meet the demand of the country's poorest population for projects to benefit their communities.

501. In order to ensure the provision of medical assistance and health care to all children, with primary attention to health, disease and malnutrition, between 1991 and 1996 FONCODES invested a total of US$ 366,285,430 for the direct benefit of the child population, under the following headings:

(a) Social welfare:

- nutrition: school breakfasts, early nutrition and day care centres;
- health: medicine kits, preventive health campaigns, training campaigns for prevention, family planning and total health care; and
- education: school kits and support for school libraries;

(b) Social infrastructure:

- nutrition: construction and upgrading of cafeterias;
- health: construction and upgrading of health units and centres (rehabilitation, replacement, expansion, equipment and furnishing); and
- education: construction and upgrading of classrooms, equipment of classrooms and construction and upgrading of playgrounds;

(c) Special projects for schoolchildren such as sweatshirts, shoes, furniture and sandals.

502. A total of US$ 136,068,619 was invested in economic infrastructure and sanitation during the period from 1991 to 1997 for the following projects:

- Water supply and sewage system: water network, drainage network, latrines and basins; and
- Construction and upgrading of artesian wells and basic environmental sanitation: pipes, sewage systems and landfills.

Table VIII.2

Peru: FONCODES investment for the direct benefit of the child population, 1991-1996

Area/sector/line	Target	Investment for children			
		Unit of measurement	Beneficiaries	Amount in soles	Amount in US dollars
Social welfare					
Nutrition					
School breakfasts and early nutrition	344,103,154	Meals	3,251,217	178,396,104	77,566,710
Health					
Medicine kits	548,995	Medicine kits	1,335,680	5,762,175	3,071,958
Preventive health campaign	1,336,171	Beneficiaries*	1,336,171	13,897,138	8,395,098
Total health care	366,363	Beneficiaries*	366,363	4,661,711	2,231,936
Education					
School kits	697,600	School kits	697,600	8,253,757	7,573,637
Support for school libraries	883	Modules	883	19,346	9,346
Social infrastructure					
Nutrition					
Construction and upgrading of cafeterias	46	Cafeterias	27,308	2,574,523	1,260,278
Education					
Construction and upgrading of classrooms	21 741	Classrooms	219,433	371,202,282	179,522,048
Equipment of classrooms	239,721	Modules	567,544	17,671,870	11,203,557
Construction and upgrading of playgrounds	749	Playgrounds	259,283	17,068,489	9,453,783
Special projects					
School sweatshirts	2,000,000	Sweatshirts	2,000,000	32,879,730	15,069,821
School shoes	4,250,000	Pairs of shoes	4,250,000	53,808,118	25,155,800
School furniture	500,000	Modules	500,000	59,180,831	25,622,456
Sandals	57,500	Pairs of sandals	57,500	177,785	149,002
Total				765,553,858	366,285,430

* Child population estimated on the basis of the total beneficiary population.

Primary care: prevention and treatment

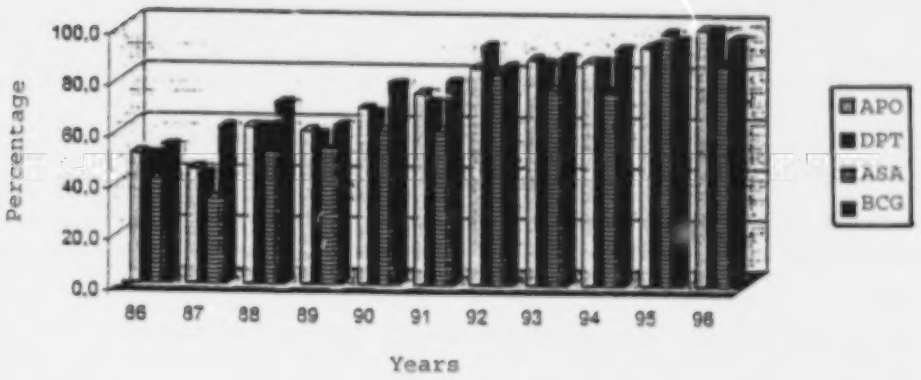
503. Public health policy has involved enormous and successful efforts to ensure universal vaccination of children under one year of age. There is now very nearly 100 per cent coverage: 100 per cent for polio and combined DPT; 99 per cent for BCG and 87 per cent for measles.

504. Since 1985, through the expanded immunization programme (PAI), the Ministry of Health has organized national vaccination days. The Ministry has

achieved a gradual increase in vaccination rates and has exceeded the rates set as targets in the 1992-1995 National Plan of Action for Children. In 1996, for example, immunization rates of 90 per cent or more were achieved. As a consequence, morbidity and mortality from vaccine-preventable diseases show a downward trend.

Figure 2

Peru: vaccination rates for children under one year of age, 1986-1996



Source: Expanded Immunization Programme of the Ministry of Health.

505. Mention should be made of the following additional measures:

- The political decision to give priority to the Expanded Immunization programme among the various ministerial activities;

- Intensification of epidemiological surveillance of other vaccine-preventable diseases;

- Implementation of the Strategy for the Elimination of Missed Vaccination Opportunities (OPPV). The second survey under this strategy was conducted in November 1995, revealing a 13 per cent reduction in the number of missed opportunities, compared with 52 per cent in 1990. The reduction was 75 per cent among children under two years of age and 84 per cent in children under one year of age;

- Revision and dissemination of the standards for the monitoring of vaccine-preventable diseases;

- Effective use of resources through deconcentration, decentralization and regionalization from the central level to the operational levels;

- The logistics and cold chain systems complied with WHO technical recommendations concerning optimal handling and conservation of cold chain and immunobiological equipment to safeguard the quality and effectiveness of vaccines;

- Completion of training programmes under the expanded immunization programme in order to provide refresher and training courses for health workers at various levels;

- Promotion of community participation by political, civil, ecclesiastical, police and military authorities, community organizations and public and private institutions; and

- Strong technical support from the international community for the attainment of the programme's objectives. Mention may be made of the support from UNICEF, PAHO/WHO, USAID and Rotary International.

506. The prevalence of vaccine-preventable diseases has decreased considerably with the increase in immunization rates for children under one year of age. Following the success achieved by the strategy of community mobilization, the vaccination days became a model for efforts to promote shared responsibility. The media and publicity agencies gave strong support by systematically transmitting information to motivate families to take their children to the vaccination stations. The health services themselves reinforced the messages locally and received support in this endeavour from the Church, the organized community and the non-governmental organizations.

Eradication of polio

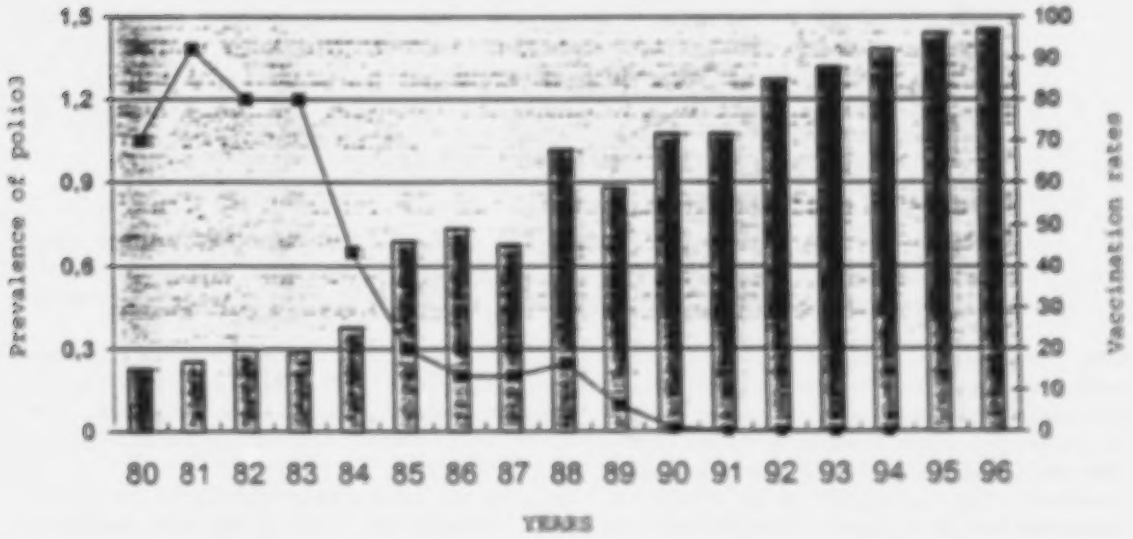
507. One of the most important achievements has been the eradication of polio five years ago, when the last wild poliovirus was isolated in Pichanaki, in the department of Junín. Since September 1994, there have been no further confirmed cases of polio in the Americas region. However, although this disease has been eradicated in Peru, as established by the International Commission for the Certification of Poliomyelitis Eradication, priority is still given to prevention of this disease. Accordingly, there are high rates of polio vaccination and active surveillance of acute flaccid paralysis. The following additional actions have been taken:

- Intensification of systematic vaccination activities as part of the regular programme and periodic activities through the National Vaccination and Health Campaign Days. In 1992, the health campaign for the eradication of polio and prevention of cholera was held in 13 departments. Two million households were visited on two successive occasions and 2.5 million children under five years of age were vaccinated against polio, and

- Increased surveillance of acute flaccid paralysis made it possible, starting in December 1993, to comply with the four surveillance indicators for this disease.

Figure 3

Peru: polio1 vaccination rates for children under one year of age and prevalence of poliomyelitis, 1980-1996



Eradication of measles

508. The last measles epidemic, in 1992, caused 210 deaths. The death rate was 0.92 per cent and there were 22,605 cases or 1,011.4 per 100,000 inhabitants. The following measures were adopted:

- In 1992, a measles immunization campaign was conducted for children under 15 years of age, irrespective of their vaccination status, achieving 78 per cent coverage. In November 1997 measles vaccine was again given to children under 15 years of age;

- In 1995, the second national measles vaccination campaign was conducted as part of the national measles eradication plan, targeting children under five years of age and achieving 97 per cent coverage in that age group; and

- The system of surveillance of feverish diseases with rashes was implemented, following the standardization of the definition of such cases in 1995.

Elimination of neonatal tetanus

509. Peru made a commitment at the 1989 World Health Assembly to eliminate neonatal tetanus, in view of the fact that there were 600,000 neonatal deaths throughout the world from neonatal tetanus.

510. Home births continue to be the most common in Peru, despite the efforts of the health services to discourage them. Because of the lack of hygiene and immunization, particularly as regards the instruments used to cut the umbilical cord, antitetanus vaccine has to be administered in Peru during pregnancy, in order to prevent the child from contracting neonatal tetanus at the time of birth.

511. Hospital births in Peru have increased slightly, from 45 per cent to 50 per cent nation-wide between 1991 and 1996. However, in rural areas the proportion of home births is higher, placing mother and child at greater risk. For this reason, the following measures have been adopted:

- Greater efforts to vaccinate women of child-bearing age with tetanus toxoids, especially in the areas at risk where births take place in unhygienic conditions and there are a large number of home births;

- Campaigns in districts at risk have made it possible to increase rates of vaccination with tetanus toxoid to 52 per cent during the period 1993-1995;

- Intensification of epidemiological surveillance through efforts to identify and investigate cases in areas at risk and to strengthen epidemiological surveillance for reporting of cases. As a result, in 1995, the 193 "silent districts" were identified, representing 10.8 per cent of the national population;

- Training of community health workers (midwives and health facilitators) in clean birthing procedures and antitetanus vaccination.

512. The impact of these actions, accompanied by research activities, is reflected in the decline in neonatal tetanus from 118 cases in 1991 (0.53 per thousand live births) to 46 cases in 1996 (0.08 per thousand live births). This represents a substantial reduction over the period in question.

Table VIII.3

Peru: vaccination against tetanus, 1991-1996

Features	1991	1996
National	35.3	70.7
Urban	41.1	76.8
Rural	26.3	61.7
Education		
None	20.8	49.3
Primary	31.1	66.0
Secondary	45.4	79.6
Higher	34.0	77.3

Source: INEI-ENDES II (1991) and ENDES III (1996).

513. As a result of the various actions undertaken by the Peruvian Government to expand vaccination against tetanus during pregnancy, seven out of every ten women were vaccinated in 1996, which is more than double the number of women vaccinated in 1991. According to the 1996 Population and Family Health Survey (ENDES 96), the most striking findings were the following:

- 70 per cent of children under five years of age received protection against neonatal tetanus during the mother's pregnancy. Most of them (51 per cent) received two or more doses. This was a significant increase in the level of immunization, since in 1991 only 35 per cent of children were protected;

- Among high-risk pregnancies, by age and birth order, the least protected are the children of mothers over 34 years of age and children with a birth order of sixth or higher (36 and 38 per cent respectively);

- As regards place of residence, the lowest rates of antitetanus vaccination are in rural areas (38 per cent), in the mountains (42 per cent) and in the departments of Huánuco (48 per cent), Puno (52 per cent) and Huancavelica (62 per cent). In metropolitan Lima, 21 per cent of children did not receive protection;

- As regards level of education, the least protected are children born to mothers with no education (51 per cent); this is more than twice the percentage observed when the mothers had higher education (23 per cent).

514. Despite the considerable improvement in rates of antitetanus vaccination, 30 per cent of children are still at risk of contracting neonatal tetanus when they are born. It has been found that the highest risk groups are children living in rural areas whose mothers have no education.

Rates and causes of mortality

515. In recent years, the main cause of infant mortality has been acute respiratory infections (ARI). It is estimated that approximately 12,000 deaths occur for this reason among children under five years of age; a large proportion are due to pneumonia. Since 1992, the Ministry of Health has been conducting winter campaigns against pneumonia.

516. Together with diarrhoea and malnutrition, respiratory diseases, especially pneumonia, constitute one of the principal causes of death among infants and children.

517. ENDES 1996 yielded the following results concerning the prevalence and treatment of acute respiratory infections, by mother's age, sex of the child and birth order.21/ Among children under five years of age, 20 per cent showed symptoms of acute respiratory infection during the two weeks preceding the interview - in other words, they were coughing and had difficulty breathing.

21/ INEI, 1996 Population and Family Health Survey.

518. The percentage of children with ARI symptoms is almost the same for the two sexes (21 per cent for boys and 20 per cent for girls) but differs according to age. The symptoms of coughing and rapid breathing are more frequent among children under 24 months, particularly those between 6 and 11 months (27 per cent). They were also more frequent among children whose birth order was fourth or higher (23 per cent). Less than half (46 per cent) of the children with symptoms of acute respiratory infection were taken to a health facility or health provider for treatment. This rises to about 50 per cent for children under 24 months but is lower in the case of fourth-born children (39 per cent).

519. During the period of reference, 30 per cent of the children under five years of age had a fever and the percentage was higher among children aged between 6 and 11 months (39 per cent) and those with a birth order of sixth or higher (33 per cent).

520. Acute diarrhoeal diseases (ADD) are one of the main consequences of the high level of chronic malnutrition in Peru; diarrhoea is the most frequent cause of death from infection in children under five years of age. Oral rehydration therapy (either a home-made solution using sugar, water and salt or the rehydration kits) is an effective and cheap way of preventing the death of children from dehydration. The incidence of diarrhoea was almost halved between 1986 and 1996, decreasing from 32 to 18 per cent during the ten-year period. This reduction was due to the health policy which focused on collaboration with the community in preventive activities and social communication and expanded training of health workers and mothers in the use of oral rehydration therapy. Some of the results of ENDES 1996 are given below.

521. As regards place of residence, diarrhoea was most prevalent in the jungle region (26 per cent) and in the departments of Junín (25 per cent), Pasco (26 per cent) and San Martín (28 per cent), in contrast with metropolitan Lima (12 per cent) and the departments of La Libertad (11 per cent) and Tacna (9 per cent). The prevalence of diarrhoea is similar among children of mothers with secondary education and those of mothers with a lower level of education (about 19 per cent). The difference occurs when the mothers have higher education (13 per cent). The greatest frequency of bloody diarrhoea was in the groups which had a higher frequency of all types of diarrhoea, the maximum being among children of mothers with no education (4 per cent) and those living in the departments of San Martín and Apurímac (6 per cent in both cases).

522. Campaigns have been conducted in Peru to promote knowledge and use of packets of oral rehydration salts. Similarly, greater emphasis was placed on increased consumption of fluids and solids by children suffering from diarrhoea, following the experience gained during the cholera epidemic. ENDES 1996 evaluated the extent of this knowledge among mothers of children under five years of age, who probably most need to use this therapy. Some indicators are given below regarding the degree of knowledge and treatment.

Knowledge of oral rehydration therapies

523. In the case of mothers of children under five years of age, 81 per cent know of some treatment for diarrhoea in children. The best known therapies were to give the children more fluids (78 per cent) and, to a lesser degree, to give them more food (14 per cent).

524. The proportion of mothers who said that children should be given less fluids was 11 per cent and this percentage was higher among the mothers with no education (28 per cent), among those living in the mountain region (17 per cent) and those living in rural areas (21 per cent). The percentages in the departments of Ayacucho (20 per cent), Puno (21 per cent), Cajamarca (23 per cent) and Huancavelica (30 per cent) contrast with those found in metropolitan Lima and in the group of mothers with higher education (1 per cent in both cases).

525. The proportion of mothers who said that children should be given less to eat than usual was higher among mothers over 34 years of age (44 per cent), among mothers without education (49 per cent) and among those living in the jungle (41 per cent), in rural areas (42 per cent) and in the departments of Huancavelica (54 per cent) and Huánuco (58 per cent). It was lower among mothers with higher education (30 per cent) and those living in the departments of Arequipa (24 per cent) and Moquegua (14 per cent).

526. Figures are given below for numbers of children under five years of age who had diarrhoea during the two weeks preceding the interview and who were taken to a health facility or health provider. These numbers are broken down into those who received oral rehydration therapy (ORT), those who received more fluids, those who received neither ORT nor more fluids and those who received other treatments.

527. Of the children suffering from diarrhoea, 80 per cent received treatment to control it and administration of increased fluids was the most common treatment (60 per cent). 30 per cent were taken to a health facility or health provider and only 16 per cent were given antibiotics.

528. Treatment of diarrhoea by increasing fluid intake was less frequent among children under 12 months, particularly those under six months (31 per cent). In this group, a larger proportion of children received no treatment at all. Similarly, this treatment was less frequent among first-born children and those with a birth order of sixth or higher, but the figures are close to the average. No difference in treatment was found between the sexes.

529. Treatment of diarrhoea by increasing fluid intake was less frequent among children of mothers with no education (45 per cent) and those living in rural areas (51 per cent), in the jungle (54 per cent) and in the departments of Huancavelica (37 per cent) and Cajamarca (42 per cent). In these departments, 32 and 24 per cent of the children with diarrhoea received no treatment at all.

530. On the other hand, treatment by increasing fluid intake was more frequent among mothers with secondary education (69 per cent) and those living in other major cities and in the remaining coastal areas (70 per cent in both cases) and in the departments of Ica (75 per cent), Arequipa and Tumbes (76 per cent in both cases).

531. Antibiotics are used more by mothers with higher education (25 per cent) and by those living in the remaining urban areas (23 per cent), in the remaining coastal areas (25 per cent) and in the departments of Tumbes (37 per cent) and Lambayeque (46 per cent). This compares with 11 per cent use in rural areas.

Child Health Institute

532. The Child Health Institute (ISN) is the only institution in Peru dealing exclusively with sick children and adolescents. Founded in 1929, it has 600 beds; in 1996, 10,375 sick children were hospitalized, 269,278 received out-patient treatment and 53,152 received emergency treatment.

533. Although many other establishments care for children, the Institute is still the principal pediatric referral centre at the national level. It not only provides care; it is also involved in teaching, research and regulatory activities. It issues an annual information bulletin on research and technological development, which includes an inventory of scientific works. It publishes a statistical yearbook annually, which summarizes the Institute's activity in figures and tables.

534. In-hospital mortality rates declined by almost half - from 8.2 per cent in 1990 to 4.3 per cent in 1996. The five most frequent causes of death among newborn children under one month (19 per cent of the total) were congenital cardiac malformation, congenital malformation of the central nervous system, sepsis, pneumonia and congenital malformations of the digestive system.

535. The most frequent causes of death among infants under 11 months (39 per cent of the total) were pneumonia, congenital cardiac malformations, non-TBC infections of the central nervous system, burns and sepsis. The most frequent causes of death among children between one and four years of age (20 per cent of the total) were pneumonia, encephalocranian trauma (ECT), burns, TBC and neoplasms. The most frequent causes of death among children aged five or more (school children and adolescents, 22 per cent of the total) were encephalocranian traumatisms, pneumonia, TBC, burns and neoplasms.

Access to water supply and sanitation

536. Access to water is essential in order to reduce diarrhoeal diseases, which are due mainly to the lack of water services. The population and housing census data for 1993 show that 40.4 per cent did not have access to drinking water supply. This shortfall was reduced by almost one fifth between 1993 and 1996, since by 1996 33 per cent of the population were recorded as being without drinking water.22/

537. The installation of more sanitation services (latrines or connection of homes to public sewage systems) is crucial for the improvement of conditions of survival. The provision of these services results in a reduction in the death rate for children under one year of age. According to the 1993 population and housing census, 36.5 per cent of households did not have a sewage disposal system. The situation had improved by 1996, when the percentage of such households had declined to 28.3 per cent.

538. In its efforts to overcome these shortcomings in public services, the State has been assisted by various social welfare agencies, among which mention may be made of the Social Compensation and Development Fund, the Programme of

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22/ INEI, 1996 Population and Family Health Survey.

Support for the Resettlement and Development of Emergency and Community Cooperation Zones, which belong to PROMUDEH and to the Environmental Sanitation Directorate of the Ministry of Health.

539. During the period 1990-1994, as part of the institutional reorganization, the National Water and Sanitation Service was established to implement the policies formulated under the National Drinking Water and Sewerage Programme. Investments in this sector tripled between 1992 and 1994, increasing from 4.9 to 13.4 million dollars a year.

540. Action to improve water supply and sanitation were given the highest priority in the prioritized strategy of the 1996-2000 severe poverty relief campaign of the Ministry of the Presidency approved by the Peruvian Government. The strategy became a tool to guide investment and provide the necessary impetus to reach the goals set for the year 2000 in those areas.

Efforts to combat disease and malnutrition

541. With the development of new techniques to deal with acute cases and childhood infections, the discovery of better methods and standards of immunization and the welcome increase in breast-feeding, a comprehensive approach has evolved in which health care and child welfare are viewed as an integral process of growth and development.

542. The general objective of the Growth and Development Subprogramme (CRED) is "to promote optimal growth and development of children under five years of age, with the active participation of the family, the community organizations and institutions and the health sector as a whole". The principal strategies of the Subprogramme are:

- To offer the CRED package for out-patient care;
- To provide on-going training for professional and non-professional staff;
- To involve all social, political and economic organizations in promoting the life and wellbeing of children, especially the most marginalized and needy;
- To encourage successful breast-feeding, providing training and evaluation, in order to promote the initiative "Mother- and Child-Friendly Hospitals"; and
- To provide information on the children who have access to medical assistance and to health services and who benefit from them.

543. There are problems in evaluating how much use is made of the Growth and Development Subprogramme by counting users, because of the lack of unified criteria to measure the percentage of the population to be covered in each area of risk (usually 60 per cent). These problems persisted until 1995, when they were eliminated by the establishment of technical and normative criteria for CRED.

544. Growth and development activities are becoming more efficient. They are recognized by the community and strengthened by the fact that there is more institutionalized care, indicators have been systematized and CRED publishes monthly data.

545. The number of children under five years of age 23/ monitored by CRED increased by 20 per cent a year between 1994 and 1996, as a result of the strengthening of the services, human resources and infrastructure and of improved performance.

Table VIII.4

Peru: children under five years of age covered by the Growth and Development Subprogramme

Year	Total population > 5 years	Coverage < 1 year No.	< 1 year %	1-4 years No.	1-4 years %	Total > 5 years
1994	2,981,324	350,549	11.7	282,993	9.4	21.2
1995	2,879,057	329,014	11.4	339,580	11.7	23.2
1996	2,902,471	486,273	16.7	557,729	19.1	36.0

Source: Statistical data from the Growth and Development subprogramme.

546. With regard to the proportion of children suffering from malnutrition classified as being chronic or serious in nature, one quarter of Peruvian children under five years of age (26 per cent) are known to suffer from chronic malnutrition as evidenced by delayed growth and height for chronological age. This is ten percentage points less than the proportion observed in 1991 (36 per cent).

547. Nation-wide surveys reveal the following percentages of malnutrition: 8 per cent at nutritional risk, 36 per cent with acute malnutrition, 67 per cent with global malnutrition and 26 per cent with chronic malnutrition. In 1995, 34 per cent of all children under five suffered from malnutrition, of whom only 2.5 per cent could be saved.

548. ENDES 96 reported that no information was available concerning the birth weight of 36 per cent of children; 5.5 per cent weighed less than 2,500 grams at birth, which was three percentage points less than in 1992. In addition, 78 per cent of mothers considered that their children were the right size - a slightly smaller percentage than in 1992 (80 per cent).

549. Because failure to gain weight, illustrated in the weight/age growth curve, is indicative of nutritional risk, CRED has set up a permanent follow-up

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23/ Children monitored in CRED: number of check-ups for each age group: under 1 year: 5 check-ups; 1 year: 4 check-ups; 2 to 4 years: 2 check-ups (one at 3 years and one at 4 years).

system, without taking into account infections, parasitic diseases and other prevalent diseases.

550. Chronic malnutrition affects boys and girls equally but increases sharply with age to reach 31 per cent of children who are about to turn five years of age, showing the cumulative effects of failure to thrive.

Table VIII.5

Peru: children under five years of age found to be at nutritional risk, 1994-1996

Years	Total population < 5 years	Nutritional risk		Total
		< 1 year	1 to 4 years	
1994	2,981,324	5,599	11,579	17,178
1995	2,879,057	12,848	34,089	46,937
1996	2,902,471	32,566	77,265	109,831

Source: Statistical data from the Growth and Development Subprogramme of the Ministry of Health.

551. Children with a birth order of sixth or higher are three times more likely to suffer chronic malnutrition than first-born children (43 compared with 16 per cent). In the case of first-born children and children conceived at relatively long intervals (four years or more), one out of four children would be classified as suffering from malnutrition.

Table VIII.6

Peru: chronic malnutrition among children, 1991-1996

Characteristics	Percentage with chronic malnutrition			
	Severe		Global	
	1991	1996	1991	1996
National	13.7	8.0	36.5	25.8
Urban	7.7	3.7	25.9	16.2
Rural	23.4	14.5	53.4	40.0
Education				
No education	33.9	20.7	65.0	50.1
Primary	19.0	11.9	48.5	36.0
Secondary	6.9	3.1	25.5	16.1
Higher	1.6	0.8	9.0	5.3

Source: INEI, ENDES II (91) and ENDES III (96).

552. Malnutrition is most frequent in the rural areas of Peru, where 41 per cent of children under five years of age suffer from chronic malnutrition. This is four times the level observed in metropolitan Lima (10 per cent). There is also considerable malnutrition among children in the mountain and jungle regions (38 and 33 per cent respectively).

Table VIII.7

Peru: children suffering from malnutrition, by type and age group, 1994-1996

Year	Acute malnutrition		Chronic malnutrition		Serious chronic malnutrition	
	< 1 year	1-4 years	< 1 year	1-4 years	< 1 year	1-4 years
1994	12,954	37,305	4,080	18,406	2,008	8,961
1995	20,155	52,147	2,592	24,550	488	2,133
1996	12,157	30,076	5,568	31,888	1,640	9,013

Source: Statistical data from the Growth and Development Subprogramme of the Ministry of Health.

553. In these circumstances, child health programmes are designed to ensure that all sectors of society, and in particular parents and children, are aware of the basic principles of child nutrition and health, the advantages of breast-feeding, environmental hygiene and sanitation and accident prevention measures. Similarly, social programmes attempt to ensure access to education and to provide support for the application of knowledge about health and nutrition, through information, campaigns and similar activities.

554. Following a strategy of priority health care for mothers or relatives of the children using the growth and development service, the Growth and Development Subprogramme provides advice and guidance based on the CRED package. This package contains information on:

- Importance of the CRED card;
- Importance of growth monitoring;
- Importance of development monitoring;
- Guidance on the Expanded Programme on Immunization (EPI), acute respiratory infections (ARI) and acute diarrhoeal diseases (ADD);
- Education and advice on feeding, stimulation, rehabilitation and accident prevention; and
- Complete physical examination.

555. The CRED activities are strengthened by the following events:

- Children's Rights Week (September), during which political organs, community institutions and organizations are involved in activities such as neighbourhood marches and intramural and extramural group training; and World Breast-feeding Week, celebrated as Breast-feeding Week. Since 1992, there have been more activities during the Week and there are plans to designate baby-friendly hospitals.

556. In 1995, 44 hospitals (88 per cent of the number anticipated) were thus designated. This initiative covered 30 per cent of breast-fed children under six months. So far 81 hospitals have been designated, representing 115 per cent of the national target of 70 hospitals.

557. The amount of malnutrition compared with the total population, by age group, is relatively small. However, it should be noted that not all health facilities have the necessary equipment to measure height and weight. The facilities could reach more children in the activities being implemented, particularly in those supported by the basic health and nutrition projects whose work focuses on five of the country's departments.

Table VIII.8

Peru: malnutrition and recovery by age group, 1996

Total population < 1 year	Malnutrition < 1 year				Total population 1 to 4 years	Malnutrition 1 to 4 years			
	Diagnosed	%	Recovered	%		Diagnosed	%	Recovered	%
600,017	19,365	3.2	2,583	13.3	2,302,454	70,977	30.0	6,015	8.4

Source: Statistical data from the Growth and Development Subprogramme of the Ministry of Health.

558. The percentage of children who recover from malnutrition is low compared with the percentage diagnosed, because there are not enough nutrition aid programmes for the number of children diagnosed.

559. The Peruvian Baby Food Committee was created because of the concern to monitor the nutrition and development of children. Since 1984, this Committee has been conducting regular monitoring in Peru's public and private health facilities, as part of IBFAN (International Baby Food Action Network). Some of these monitoring activities were part of the world-wide monitoring carried out by various local groups of IBFAN.

560. The measures adopted to recognize and guarantee the right of all children to an adequate standard of living for their physical, mental, spiritual and social development were:

- The Growth and Development Subprogramme uses developmental evaluation instruments and protocols such as the abbreviated test (0 to 4 years), DDST (under 2 years) and TEPSI (2 to 5 years), which cover four areas: language, motor skills, coordination and social skills. In addition, there are plans of early stimulation and follow-up of children at risk, medium risk and high risk, with

deficiencies and slow development. Action is coordinated for their referral and/or transfer if appropriate;

- For growth measurement, the weight/height/age parameters are recorded using the evaluation standards in the CRED card. These measurements are reflected in the weight/age growth curves so that risk factors can be identified such as inadequate intake and malabsorption of food, frequent and prolonged bouts of infectious diseases, early abandonment of exclusive breast feeding and early weaning;

- Promotion of exclusive breast-feeding;

- Dissemination and use of the CRED package; and

- CRED comprehensive approach.

561. The indicators mentioned are used to evaluate standards of living and their effect on the child population, by sex, age, region, rural and urban area, social and ethnic origin and family situation.

Table VIII.9

Peru: number of problems diagnosed by the CRED Subprogramme by area of intervention

Year	Total population < 5 years	< 1 year				1 to 4 years			
		Motor	Coordination	Language	Social	Motor	Coordination	Language	Social
1994	2,981,324	2,113	2,240	1,536	837	3,577	2,682	4,459	3,677
1995	2,879,057	3,633	8,159	4,045	3,874	7,093	7,308	15,075	7,993
1996	2,902,471	6,864	12,997	7,641	6,598	11,773	18,989	24,830	12,725

Source: Statistical data from CRED subprogramme.

562. For the detection of problems of psychomotor development (PMD), the evaluations made are more detailed and require the use of more sophisticated instruments and protocols and the allocation of more time for each child. The results presented show what was detected in CRED units of the health facilities of the Ministry of Health. While they retained the same structure between 1994 and 1996, the skills and therefore the ability of the staff of health facilities were strengthened. The biggest weakness of this programme is the inability to cure most of the cases detected, because there are not enough professionals to intervene in such problems, when they are more serious. In recently detected cases of risk, an age-appropriate stimulation plan is followed, principally with the intervention of family and parents.

563. The number of children treated is the main indicator of the extent of use of the CRED subprogramme in the population under five years of age. The health facilities are organizing promotional activities, staff training, dialogue in community organizations and integration with other programmes. Between 1994

and 1996, there was an increase in coverage, because the CRED subprogramme was increasingly provided on an in-patient basis.

Breast-feeding and supplementary feeding

564. Breast-feeding provides children with adequate nutrients and confers immunity to a number of common childhood diseases. Exclusive breast-feeding of children under four months increased significantly, from 41 per cent in 1991 to 61 per cent in 1996. Some findings of ENDES 1996 on breast-feeding and supplementary feeding are given below.

565. At the time of the survey, 99 per cent of children under four months were being breast-fed. The percentage declined in reverse ratio to age: from 96 per cent for children between four and six months to 84 per cent for children between 10 and 12 months. Exclusive breast-feeding, which is recommended during the first six months of life, is practised for the majority of infants only during the first three months of life (61 per cent). In 1991, 41 per cent of infants in this age group were being breast-fed. Supplementary feeding starts at a young age, usually with fluids during the first three months (35 per cent). Between the ages of four and six months, 64 per cent of infants receive supplementary feeding in addition to breast milk (29 per cent receive fluids and 34 per cent receive solid food). Only one out of three infants (32 per cent) is exclusively breast-fed. Bottle feeding does not depend on the age of the infant, varying between 28 and 34 per cent during the first year of life.

Universal iodation

566. Because iodine is an essential micronutrient for normal mental and physical development, in 1986 the Peruvian Government launched a National Programme for the Prevention and Control of Iodine Deficiency Disorders (PRONEDDI). In 1990, 76 per cent of the salt consumed in Peru was iodinated. In 1992, the Ministry of Health, with the assistance of UNICEF, the European Union and the Canadian International Development Agency, started a project aimed at universal iodation of salt for human and animal consumption; technical and financial support was encouraged and provided for the installation of iodation plants; promotional activities targeted small and medium-size producers.

567. An evaluation of the progress made during the period 1987-1995 conducted by the governing body of PRONEDDI showed a decrease in the population at risk. These results can be seen from the variation in the following indicators:

- Increase in supply of iodinated salt from 59.6 to 112 per cent of national demand;

- Increase in consumption of iodinated salt from 60 to 80 per cent in high-risk areas;

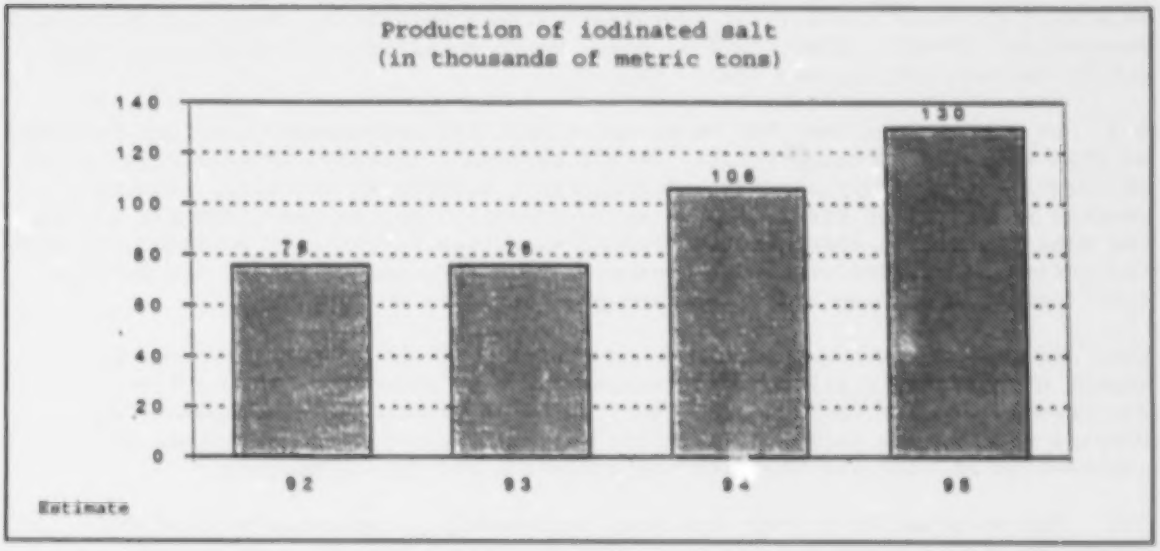
- Reduction in the population at risk from 6 million to 1.5 million; and

- Reduction of incidence of goiter from 36 to 10 per cent.

568. The increase in the consumption of iodinated salt follows the installation of iodation plants in endemic areas. In 1995, the interim goal of universal iodation of salt for human consumption was attained, since production of iodinated salt reached 130 million metric tons and exceeded national demand by 12 per cent.

Figure 4

Peru: production of iodinated salt, 1987-1995



National Food Aid Programme

569. During recent years,24/ children have been receiving food aid at cafeterias and school breakfasts channelled through the National Food Aid Programme (PRONAA), using public funds. However, the meals provided have not always gone solely to children and adolescents, but have been sent to the poorest sectors of the population, which are usually children and adolescents.

570. Despite the public and private efforts made, the indicators of chronic malnutrition reveal a large number of children at high risk of malnutrition and PRONAA, which is accountable to PROMUDEH, is coordinating efforts and resources to evolve solutions to the nutritional problem which will reach children on a large scale and with appropriate supervision.

571. PRONAA was created in 1992 with the aim of improving the food and nutrition level of the population in a state of critical poverty and it therefore supports the work of women organizers in cafeterias as the principal means of reaching needy families. Starting in 1996, in accordance with the

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24/ National Food Aid Programme: Government report on the implementation of the Convention on the Rights of the Child, Lima 1997.

guidelines for the poverty relief campaign and within the context of the prioritizing of social support through the child feeding programme, priority has been given to food aid to the nutritionally most vulnerable groups, mainly composed of children under five years of age and of pregnant women and nursing mothers in the priority districts (419) who are severely impoverished.

572. Since 1993, PRONAA has been providing food aid to children, adolescents, pregnant women and nursing mothers using international cooperation funds, through the conclusion of PRONAA agreements with public and private institutions and non-governmental organizations such as: PRISMA: Prosierra project; PROMUDEH: Wawa Wasi project; Ministry of Education: school breakfasts; Peruvian Children's Foundation; INABIF; CEDRO; Caritas Peru; María Auxiliadora Congregation; Lima public welfare office; and Stella Maris.

573. In view of the need for large-scale food aid programmes targeting children at greatest risk of malnutrition, PRONAA adopted a strategy of working with the children's food services (SAIS) at children's cafeterias and early education centres and with non-institutional early education programmes (PRONOEI) and in the Wawa Wasis. In these places, PRONAA exercises nutritional surveillance with the active participation of the organized community and of public and private institutions providing assistance and protection to children.

574. Because PRONAA considers that food aid for children is a fundamental aspect of children's all-round development, it is promoting other activities designed to protect child health (monitoring of growth and development) and provide appropriate early stimulation; for this reason, the programmes are implemented in coordination with the education and health sectors.

575. The Peruvian Government has been implementing programmes of food and nutrition aid, support and security through various public agencies and institutions. In order to enhance communication between executing agencies, it established a Technical Commission for Multisectoral Coordination, with the task of proposing to the Interministerial Commission for Social Affairs (CIAS) a plan and policies to be adopted in the area of nutrition and food at the national level. The plan targets the population in a state of critical poverty. This Commission is composed of representatives of PROMUDEH (which chairs the meetings), of the Ministries of Health, Education, Agriculture and Fisheries, of the Ministry of the Presidency and of the public bodies PRONAA and FONCODES.

576. Thanks to the efforts to combat child malnutrition through the allocation of public funds and with the support of international technical cooperation agencies, the general development of infants under one year is being protected. International technical cooperation agencies gave strong support for the attainment of the goals set by the programme. Mention may be made inter alia of the European Union, WFP and USAID.

Programme of family planning and/or reproductive health

577. The Ministry of Health considers that reproductive health (RH) is a prerequisite for the complete physical, mental and social wellbeing which men and women need in order to engage safely in the functions of the reproductive process throughout their lives. It therefore assumes responsibility for ensuring that appropriate attention is given to reproductive health, especially

of women. In the case of children, the Ministry supervises the content of sex education and combats violence and sexual abuse; in the case of adolescents, it promotes responsible and safe sexuality; in the case of adults, it assists in family planning and provides health services so that children will be born healthy.

578. The general objective is to improve reproductive health, as a basic means of promoting the human development of the population, so that individuals can attain their maximum potential and make the best use of their skills.

579. Since 1991, the programme of reproductive health and family planning has been implementing local programmes at the level of the health subregions, as part of a strategy of decentralizing decision-making power and increasing local autonomy. At present, efforts are being made under the programme of reproductive health to provide total reproductive health services. The objectives and activities of the following programmes have been functionally merged for this purpose: perinatal maternity care, school and adolescent health, family planning and prevention of cervical cancer.

580. Some of the main activities have been geared towards a comprehensive health programme, designed to promote preventive medicine in general and, in particular, to protect sexual and reproductive health. With this aim, health and sexual guidance components have been included in school curricula, with assistance in curriculum design and in teacher training nation-wide. Similarly, comprehensive services for adolescents, staffed by multidisciplinary teams, have been set up at health facilities of the Ministry of Health. It is estimated that they currently meet about 40 per cent of demand throughout the country.

581. The programme of maternal and perinatal health has helped to improve access to antenatal monitoring, birthing facilities and post-partum care. Although considerable progress has been made in maternal care, there is still not enough being done to improve perinatal care.

582. Public funding has been channelled to priority actions and activities. Despite the efforts made, however, the system of maternal and perinatal health care still needs to be substantially improved, as regards both the administration of the scarce resources and the identification of the population needing them.

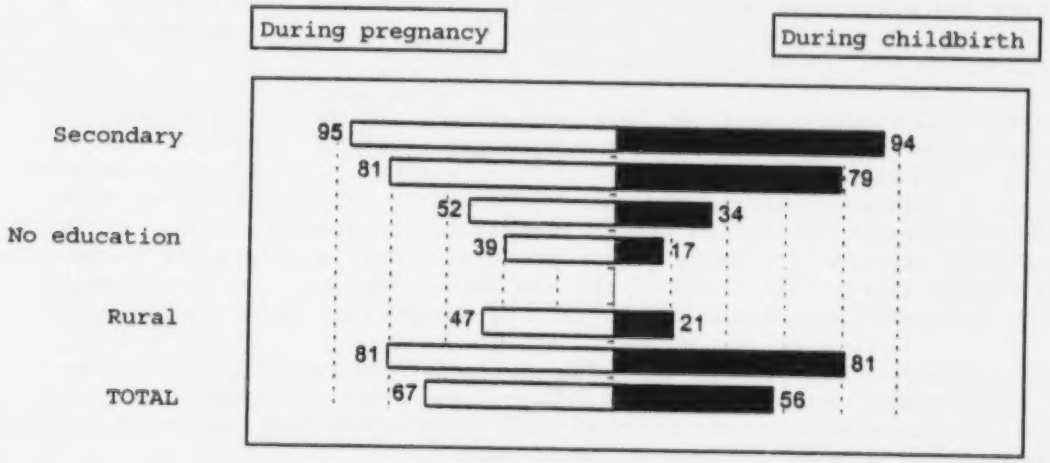
583. Most Peruvian women have their first child at a very young age; 54 per cent were under 21 years of age when they gave birth to their first child. Various research studies suggest the existence of a relationship between early maternity and poverty. In addition, maternal and child health requires attention because of the high levels of fertility, the prevalence of endemic diseases and the surge in malaria and cholera.

584. Although action is being taken to prevent and monitor STDs, the extent of maternal syphilis is still not known. Cases of HIV/AIDS are still on the increase and the disease is usually contracted during adolescence.

585. As regards women's health care during pregnancy and childbirth,25/ in 1996 it was found that 67 per cent of women had received some prenatal care from qualified personnel over the previous five years. This represented an increase compared with 1991, when the proportion was 61 per cent. It should be noted, however, that in 1996 more than half the women in rural areas received no medical care at all. Education levels are also important in this respect; prenatal care was received by 39 per cent of women with no education, by 52 per cent of those with primary education and by 95 per cent of those with higher education. In inland areas, however, there are significant differences; in Huancavelica, for instance, which is one of the poorest departments, only 30 per cent of pregnant women received prenatal care.

Figure 5

Peru: health care provided to women by qualified personnel



586. There are greater disparities in the provision of care by qualified personnel during childbirth. Only 56 per cent of births were assisted by a physician or obstetrician. In rural areas, where such care is the rarest, only 21 per cent of women were assisted by qualified personnel; of the women without education, barely 17 per cent were assisted and of the women with primary education only 34 per cent were assisted. The situation is worse in the case of birthing facilities. It was found that only half the births took place in health facilities. This proportion drops to 15 per cent in the case of rural women and to 12 per cent in the case of women without education. Women in Huancavelica are in an even worse situation, since only 7 per cent of them gave birth in a health facility.

587. With regard to teenage pregnancies, the programme of reproductive health includes a segment designed to promote information, education and training activities geared to adolescents. In the various facilities of the Ministry of Health, there are advice bureaux specifically for young people.

25/ INEI, 1996 National Population and Family Health Survey.

588. Because of the priority which Peru attaches to the prevention of teenage pregnancies and the reduction of maternal mortality, and since the National Family Planning Programme (PNPF) is essential to the respect for people's right to choose how many children to have, the National Coordinating Commission for Family Planning and Reproductive Health Policies (COORDIPLAN) was established.26/ This Commission, composed of representatives of the Ministries of Health and Education and chaired by PROMUDEH, will be responsible for evaluation, follow-up, promotion and information concerning activities being undertaken in the area of family planning and reproductive health, for the purpose of formulating national policies and programmes.

589. With the same goal, an interagency cooperation agreement was concluded between PROMUDEH and the Ministry of Health in order to lay the foundations for the coordination and implementation of joint activities to promote general health, particularly reproductive and sexual health, nutrition and rehabilitation, gender-sensitivity training for physicians and health workers and campaigns to increase awareness among the population. The aim of all these activities is to generate informed demand and to improve the quality of services provided to women and children, who are the target population of PROMUDEH.

590. The Ministry of Education has also prepared five family and sex education guides for teachers and parents, aimed at children in the first to fifth grades of secondary education. These have been used at schools throughout the nation since 1996.

591. The activities undertaken by the Peruvian Government under the programme of reproductive health have resulted in recent years in a significant nation-wide reduction in fertility. However, the gap between the number of children born to women in rural areas and to those in urban areas still needs to be reduced, as do the differences among women depending on their level of education.

Table VIII.10

Peru: overall fertility rate

	1986	1991	1996
National	4.3	4.0	3.5
Urban	3.1	3.0	2.8
Rural	6.3	6.2	5.6
Education			
No education	6.6	7.3	6.9
Primary	5.0	5.4	5.0
Secondary	3.1	3.4	3.0
Higher	1.9	2.2	2.1

Source: INEI, ENDES 1996.

26/ Supreme Decree No. 055-97-PCM of 2 November 1997.

592. As a result of programme activities, contraceptive use has almost doubled over the last ten years, so that two out of every three Peruvian women were using some form of contraception. Although this increase is more marked in rural areas and among less educated women, the discrepancies which still exist pose a challenge which must be met in Peru.

Table VIII.11

Contraceptive use

	1986	1991-1992	1996
National	45.8	59.0	64.2
Urban	58.5	66.1	70.2
Rural	24.0	41.1	51.2
Education			
No education	19.1	34.9	38.3
Primary	39.3	51.3	59.0
Secondary	61.9	65.6	70.2
Higher	69.1	73.2	75.4

Source: INEI, ENDES 1996.

Health programme for schoolchildren and adolescents

593. The goal of the health programme for schoolchildren and adolescents is preventive and promotional. Since 1990, a series of actions has been under way to improve the health and wellbeing of adolescents. In addition, adolescents are encouraged to participate in the creation of healthy conditions for their overall development as individuals and members of the family and the community. In 1992, an agreement was concluded between the Ministries of Health and Education for the implementation of the proposals of the health sector in the education community (teachers, students, parents and community). The programme activities cover children and adolescents between 5 and 19 years of age, who number 8.1 million.

594. The activities undertaken during the period 1993-1996, by programme, were:

- National and interagency seminar on abuse of schoolchildren and adolescents;
- National workshop seminar for the dissemination and implementation of the national comprehensive health plan for schoolchildren and adolescents; and
- Seminars on health guidelines for schoolchildren and adolescents, in the 33 health subregions (attendance not specified).

595. The following strategies were evolved for the attainment of the objectives:

- Establishment of the national network of the health programme for schoolchildren and adolescents, with the active participation of the 33 health subregions;

- Agreements with public and private institutions and with non-governmental organizations on preventive and promotional activities pertaining to total health services;

- Priority attention to high-risk areas at all levels of the health sector.

596. The main achievements of the health programme for schoolchildren and adolescents are:

- Decentralization of the programme to the 33 subregions;

- Training of 9,981 health professionals;

- Training of 34,459 teachers and students in education components for health;

- Establishment of advisory services in the community (889);

- Creation of schools for parents (895);

- Organization of two workshops per year in each of the 33 health regions.

Programmes and strategies to prevent HIV

597. In Peru, the technical body responsible for efforts to combat HIV and AIDS is the Programme for Control of Sexually Transmitted Diseases and AIDS (PROCETSS). It was officially established in February 1996. Initially, the Ministry of Health tackled the AIDS epidemic through commissions with specific functions but these were soon transformed into a Special Programme of AIDS Prevention (PECOS). In the light of the progress made in the area of prevention and control of AIDS, the existing integrated programme of STD and AIDS control was evolved, with the following objectives:

- To reduce STD and HIV transmission;

- To reduce the individual, social and economic impact of STDs, particularly HIV infections; and

- To mobilize, unify, channel and optimize efforts to combat STDs.

In order to achieve these objectives, the following strategies were pursued:

- Early diagnosis and treatment of STDs;

- Information, education and communication to achieve behavioural changes;

- Provision of anti-HIV treatment free of charge to HIV-positive pregnant women and their newborn children;

- Universal syphilis screening without charge for pregnant women during the first prenatal check-up and at the time of childbirth, and treatment without charge for cases of syphilis;

- Provision of quality service for HIV-positive persons;

- Promotion of the human rights of HIV-positive persons; and

- Strengthening of the national response to AIDS.

598. For the purpose of evaluating the prevalence of HIV infections in Peru, it has since 1986 been compulsory to report cases of AIDS; since 1996, it has also been compulsory to report cases of HIV infection. The information, which is always anonymous, goes from the various operational units to PROCETSS at the central level, through the regional and subregional health directorates. The concentration of information makes it possible to keep updated records for persons who receive care at various institutions and to avoid duplication of records. These records reveal trends in the AIDS epidemic, although it should be remembered that, when we evaluate AIDS cases, we are evaluating a transmission event which occurred, on average, five or more years previously.

599. The information on AIDS cases reported to PROCETSS up to 31 May 1997 reveals the following:

- The increase in AIDS cases in Peru is continuous and accelerating;

- Young Peruvians are most affected by AIDS;

- The number of women involved in the epidemic has increased each year. The male/female ratio of reported AIDS cases declined from 14.4 to 1 in 1990 to 3.6 to 1 in 1996;

- HIV is mainly transmitted sexually;

- There is a continuous increase in AIDS cases contracted perinatally; and

- AIDS is mainly concentrated in the large cities, although cases are reported in all the departments in Peru.

600. In order to evaluate trends in HIV and STD infection, in 1996 the Ministry of Health counted cases of HIV and syphilis infection among pregnant women between 15 and 24 years of age during prenatal check-ups in eight cities. In the same year, the prevalence of HIV and syphilis infection was evaluated in the same population in the city of Lima, with the participation of nine hospitals and the Maternal Perinatal Institute.

Table VIII.12

Peru: AIDS cases by reported place of residence and by age in children under 15*

Regions	< 1 year	1 to < 5 years	5 to < 14 years	Total
Lima north	14	12	6	32
Lima south	10	8	5	23
Lima east	6	6	4	16
Lima city	17	15	11	43
Callao	0	0	0	0
Apurímac	0	0	0	0
Arequipa	0	0	0	0
Ayacucho	0	0	0	0
Cajamarca	0	0	0	0
Amazonas	0	0	0	0
Ancash	0	0	0	0
Cuzco	0	0	0	0
Huancavelica	0	0	0	0
Huánuco	0	1	0	1
Ica	0	4	0	4
Junín	1	0	0	1
La Libertad	1	2	0	3
Lambayeque	0	1	0	1
Loreto	0	0	0	0
Madre de Dios	0	1	0	1
Moquegua	0	0	0	0
Pasco	0	0	0	0
Piura	4	0	1	5
Puno	0	0	0	0
San Martín	0	0	0	0
Tacna	0	0	1	1
Tumbes	1	0	0	1
Ucayali	0	0	0	0
Total	54	50	28	132

* Cases reported to PROCETSS as at 31 May 1997.

601. These figures show that the prevalence of HIV infection in pregnant women between 15 and 24 years of age is less than 1 per cent for Peru and 0.28 per cent for the city of Lima. The prevalence of syphilis, defined as RPR positive, among pregnant women in the same age group in the city of Lima is 1.178 per cent.

602. In order to prevent vertical HIV transmission, the Ministry of Health offers anti-HIV treatment without charge to HIV-positive pregnant women and their newborn babies. The treatment offered is the one currently recommended and consists of Zidovudine capsules during pregnancy and injections during labour and Zidovudine syrup for newborn babies during their first month of life. In 1996, 59 per cent coverage was achieved and in 1997 it is hoped to achieve coverage over and above the goal of 90 per cent.

603. The Ministry of Health offers prophylactic treatment without charge for tuberculosis and pneumocystic pneumonia to HIV-positive persons, including parents and children, since it has been found that such treatment improves their quality of life.

604. With regard to campaigns, programmes, strategies and measures to prevent and combat discriminatory attitudes towards children with HIV infections or AIDS, the Ministry of Health has promoted and participated in various initiatives designed to guarantee the fundamental rights of HIV-positive persons, including children. Some results achieved in the past 16 months in this area are:

- Regulations setting out the policy, arrangements and procedures for the control of STDs and AIDS in Peru, approved by Ministerial Decision No. 235-96-SA/DM of 2 April 1996;

- Act No. 26626, which made the Ministry of Health responsible for drawing up the national plan of action to combat the immunodeficiency virus, AIDS and sexually transmitted diseases (CONTRASIDA), promulgated on 19 June 1996;

- Regulations under the above-mentioned Act No. 26626, approved by Supreme Decree No. 004-97-SA of 18 June 1997.

605. These instruments expressly mention the right of HIV-positive persons, including children, to non-discrimination, confidentiality, autonomy and access to health.

Family spending on health care

606. Public policies have been directed at poverty relief. According to ENAHO data,27/ 3.5 per cent of family income is spent on health care and maintenance; in the rural areas and the jungle, the amount is slightly higher. The spending relates mainly to the purchase of medicines, while 23 per cent is for medical visits and 4 per cent for hospitalization.

C. Social security and care facilities

Child health programme

607. Within the Peruvian Social Security Institute, the child health programme has in recent years included new activities and programmes aimed at children

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27/ INEI, National Household Survey conducted in 1996.

under five years of age and women of child-bearing age, with the aim of improving the care provided and the users' quality of life.

608. During the period 1993-1997, the programmes with national coverage of the insured and their direct families targeted children under five years of age and women of child-bearing age, whether pregnant or not.

609. In accordance with the official policy, starting in 1995 child immunization coverage is being gradually increased, from 12,278 in 1993 to 48,099 in 1996. In 1996, coverage for children under one year of age was 43 per cent of the insured population.

610. The programme for the monitoring of child growth and development was expanded from an activity to a care package, which includes evaluation of growth, development, nutritional status, physical, sensorial and oral examination, child protection, feeding patterns and personalized training, increasing the coverage to 45 per cent (from 98,048 in 1993 to 197,603 in 1996).

611. Coverage under the programme for the control of acute diarrhoeal diseases remains stable, with 45,001 cases controlled in 1996. Recently, in 1997, a child nutrition programme was launched; it now has a nation-wide coverage of 13 per cent. It was found that 37,650 children were well-nourished and 6,150 children were suffering from acute, slight and moderate malnutrition, which is being controlled.

Peru: activities undertaken in nation-wide programmes by departmental divisions, national hospitals and special services

Expanded immunization programme	Monitoring of growth and development
Immunization of children under one	Monitoring of under-five diseases
Immunization of one-year-olds	DDST evaluation
Immunization of WCA (pregnant and non-pregnant)	Tepsi evaluation
	Nutritional care
Home visits	Social care
Group education	Home visits
Mass education	Group education
	Mass education

Acute diarrhoeal diseases	Child nutrition
Medical care	Nutritional care
Nursing care	Rehabilitation following acute malnutrition
Oral rehydration therapy	
Home visits	Home visits
Group education	Group education
Mass education	Mass education

* Preventive and promotional campaigns at the national level in accordance with the health schedule.

Comprehensive Maternal Health Programme

612. In 1995, the Peruvian Social Security Institute (IPSS) established the Comprehensive Maternal Health Programme (PROSIM) to provide comprehensive and quality care to insured patients and to promote the rationalization of operating costs. It launched the "Risk-free pregnancy" initiative, which concentrated on preventive and promotional activities.

613. With regard to the provision of planning services, the programme involves the delivery of services to well informed users with freedom of choice, through trained and specialized professionals, using a broad range of methods to promote timely delivery and easy access. Some of the achievements are:

- Antenatal check-ups, 65 per cent;
- Postnatal check-ups, 30 per cent;
- Family planning, services provided to 120,000 persons, with preference for the intrauterine device (28 per cent) and very low male participation; and
- Systematization of the perinatal data system.

614. Starting in 1996, IPSS adopted a new approach geared to prevention and to the promotion of general health, consolidating the activities of the Division of External Health Programmes and developing its preventive and promotional activities. Since pregnancy is a physiological state involving a risk of complications, in the area of reproductive health two types of risk-based approach are adopted:

(a) Prevention of obstetric risk, with the programme of antenatal and postnatal monitoring, reaching 90 per cent coverage of pregnant women and 35 per cent of post-partum mothers. Emphasis is placed on upgrading care by including obstetrical psychoprophylaxis.

(b) Prevention of reproductive risk through the programme of family planning, reaching 121,000 women. In August, joint intervention strategies were initiated under the National Comprehensive Health Plan. These efforts are in addition to the government poverty relief programmes and actions under the emergency plan for the reduction of maternal mortality, with emphasis on the organization of supply and demand for specific methods and always with respect for the principle of free and informed choice. 15,500 voluntary surgical sterilizations were performed with minimal complications and the women's lives were protected.

(c) In-patient diagnosis of gynecological cancers in over 80 per cent of female patients. For 1997, the most noteworthy achievements were the following: adoption of strategies actively seeking users; plan to increase antenatal care to 100 per cent; and 70 per cent coverage for postnatal care. Family planning services were provided to 130,000 persons; the population is receptive to contraception and the IUD and injectable contraceptives are the most popular methods.

Young adolescents programme of the Peruvian Social Security Institute

615. The IPPS has a project for young people which is designed to train teenage leaders and which emphasizes sexual and reproductive health. The approach adopted consists in identifying leaders in organizations and/or schools and working on selected topics in participatory "think tanks".

616. The achievements of this project to date are: 14 IPSS youth centres in operation; 70 first-level facilitators (professionals); 645 second-level facilitators (teenage leaders); 6,450 third-level facilitators (concerned teenagers); sex education module approved; situational and attitudinal diagnosis of adolescents provided in a process which will conclude on 15 December; and ongoing supervision and monitoring. The result has been:

- Adequate monitoring of pregnant women, promoting their early inclusion in a hospital setting, if they are at risk;

- Establishment of advice bureaux to ensure that free, informed and voluntary choices are made with regard to family planning and sexual and reproductive health by 30 per cent of the population of child-bearing age;

- Special promotional services for adolescents as part of the chain of social services for this risk group;

- Identification of teenage leaders committed to the project goal. Adolescents are able to interact with their peers nationally and internationally, for instance at an IPPS youth event entitled "August 97 trinational meeting" with the participation of Peru, Chile and Bolivia; and

- Independent adolescents who are able to assume responsibility for their behaviour and possess assertive communication skills.

Insurance for schoolchildren

617. The Government adopted a very important measure with the introduction of free insurance for schoolchildren in August 1997 on the occasion of the launching in June 1997 of the 1996-2000 National Plan of Action for Children. This measure targets an important segment of the population, since children and adolescents are the most vulnerable population group. It implements one of the rights proclaimed in the Convention: the right to be protected from disease or accident with preservation of one's health. This health care service targets students who attend a State school or programme, at any level. Schoolchildren between 3 and 17 years of age are entitled to receive health care.

618. Health care is provided in the 33 health subregions in Peru, at 5,900 health centres, to 5,880,000 schoolchildren attending 42,000 State education centres. The programme operates around the clock and throughout the year, including vacations, and provides services at the place where the need for care exists.

619. Since it was introduced, insurance for schoolchildren has covered 455,000 students throughout Peru. Of the services provided, 89 per cent was outpatient care, 7.7 per cent emergency care, 1.7 per cent hospitalizations and the remainder consisted of surgery and intensive care. The expenses of 45 burials of students were also covered. This measure is part of the strategies of the poverty relief plan, one of whose tasks is to assist the most vulnerable sectors of the population such as children and adolescents.

620. The services covered include consultations, medicines, dental care, laboratory tests, X-rays and ecography provided by the health facilities of the Ministry of Health and IPSS. These services will be provided to schoolchildren without any charge and will be paid for by public funds, through the school insurance risk manager. Statistical and epidemiological profiles are being prepared for this insurance programme.

621. The insurance not only protects students' health but also has additional benefits because fewer students drop out and probably fewer repeat grades, since it provides incentives to stay in school.

Child care centres

622. One way of providing child care is to create facilities which can meet this need. INABIF, which is accountable to PROMUDEH, is responsible for providing total care to children and adolescents through the various day care centres which it operates. The type of care and assistance provided by INABIF reflects the idea that assistance to the sectors of the population at social risk should take the form of donations of food, clothing and medicines, inter alia.

623. In 1993, the Peruvian Government inaugurated a model of total care for children under three years of age, known as Wawa Wasi (children's house), reflecting the principles of the Convention on the Rights of the Child and the National Plan of Action for Children. This service was offered because of the poor coverage of care provided to this age group (1.3 per cent) and particularly to the segment in a situation of risk.

624. The Wawa Wasi programme received strong support from the Peruvian State, initially through the Ministries of Education and Health and the Ministry of the Presidency. Since 1996, the programme has been administered by PROMUDEH and has succeeded in establishing more than 5,800 community homes throughout the nation, currently serving 35,000 children of poor mothers who are working.

625. These community homes, which are run by maternal caregivers, provide food, security, monitoring of growth and development and psycho-social guidance for children.

D. Standards of living and measures to improve the quality of life

626. Recognition that children are the country's most valuable asset is the underlying principle of action by the State. Accordingly, government action has taken the form of strong support for child development, within the framework of a social policy that accords priority to poverty relief.

627. Initially this concern of the Government was reflected in the 1992-1995 National Plan of Action for Children, whose objectives and goals were taken into account in the formulation of the poverty relief strategy (1993-1995). The aim of this strategy was to meet the pressing needs of the country's most vulnerable population and to lay the foundations for the definition of a medium-term poverty relief strategy.

628. Under this strategy, the Ministry of the Presidency was established, combining the various agencies which had been involved in social programmes. In addition, FONCODES was created in order to meet the demand of the poorest inhabitants of Peru for projects to benefit their respective communities. Its actions were supplemented with PRONAA, the National Housing Fund (FONAVI), the Institute of Education and Health Infrastructure (INFES), the National Development Institute (INADE) and INABIF, among others.

Social Compensation and Development Fund

629. In 1991, the Peruvian Government created the National Social Compensation and Development Fund (FONCODES) 28/ to finance the implementation of social investment projects throughout Peru, with emphasis on job creation, health, nutrition, basic education and other such projects, for the benefit of the impoverished population. Subsequently, FONCODES was established as an autonomous decentralized agency, accountable to the Office of the President of the Republic, enjoying functional, economic, financial, administrative and technical autonomy.29/

630. FONCODES is a social investment fund created in an effort to offset the adjustments required by the stabilization of the economy and to improve the living conditions of the impoverished population. The Fund is one of the components of the State's social programme which is supplemented, in specific priority areas, by the subsidiary action of the ministries and decentralized public agencies, acting rapidly and flexibly. In other words, it is an instrument which improves the quality of social spending and reaches out equitably and efficiently to poorer people throughout the country, creating temporary jobs and meeting the basic nutrition, health, education and sanitation needs of the population.

631. FONCODES is governed by the following principles:

- Emphasis on the impoverished population, with priority to severely impoverished groups, mainly located in the rural zones of the high Andes and the jungle;

- Support for initiatives by the population organized in action groups which operate as private agencies;

28/ FONCODES, established by Legislative Decree No. 657 of 15 August 1991.

29/ Decree Law No. 26157 (30 December 1992); and Statutes approved by Supreme Decree No. 057-93-PCM (19 August 1993).

- Transfer of resources to the action group for local project implementation. In other words, FONCODES finances but does not execute; it only monitors the correct use of funds;

- Commitment by the community and the State to guarantee the operation and maintenance of the projects financed;

- Participation of recipients in identification, implementation, operation and maintenance; and

- Use of technology appropriate to the area and of local inputs and manpower.

632. Social spending is decentralized through 23 area offices, which can approach the poorest population and give them access to financing for their projects. Half of the area offices are empowered to approve financing of projects, through area approval committees (CZAP) and all of them are under the control of the local project executors.

633. Thus 94 per cent of the FONCODES budget is used to finance projects submitted by the people themselves, and only 6 per cent is spent on operating costs. This represents highly efficient social spending, so that more resources can be allocated to the financing of projects.

634. In addition, management tools have been developed to maximize the Fund's efficiency and productivity. In this connection, almost 22,000 projects were financed during the period 1991-1997, amounting to an investment of over 800 million dollars, with total coverage of the 1,557 districts classified as poor.

635. International agencies such as the World Bank (WB) and the Inter-American Development Bank (IDB) have described FONCODES as a model social fund.

Programme of support for resettlement and development of areas in a state of emergency (PAR)

636. To achieve its goal of reducing severe poverty and promoting social development, the Government found it necessary to expand assistance to displaced families and communities affected by terrorism, through the project of support for resettlement, with the aim of supporting the population affected by terrorist violence and particularly displaced persons returning to their homes.10/

637. This project was initiated at the end of 1993. Its expansion to the development of areas in a state of emergency, when it was incorporated in PROMUDEH in 1996, broadened its approach and activities by incorporating integrity and gender criteria. This project is helping to consolidate the process of pacification in Peru and to achieve a steady reduction in poverty among beneficiaries.

10/ PAR, Report on the Employment of Children and Adolescents, 1997.

638. In order to attain its objectives, PAR is engaged in the following activities:

- Institutional coordination, which is essential in order to respond to the requests and proposals of the population concerned. This is achieved through a Multisectoral Coordination Committee, composed of representatives of the Ministry of the Presidency and of the Ministries of Health, Education, Agriculture, Defence, Justice, Transportation, Communication, Housing and Construction;

- Promotion of participation by beneficiaries, since this is the key to the PAR operational strategy; and

- Broad geographical coverage. However, priority is given to the departments of Ayacucho, Apurímac, Huancavelica and Junín, precisely because they were proportionally the worst affected by the displacement of families (85 per cent of the total). At present, PAR covers 12 departments, 52 provinces, 296 districts and over 1,000 population centres.

639. Among PAR activities to assist children, mention may be made of the following: one specific way of eliminating discrimination against adolescents has been to train personnel and facilitators in the various manifestations of gender inequality (63 PAR professionals and 100 social facilitators). In addition, 1,500 leaders in the communities of metropolitan Lima were trained in reproductive rights and self-esteem.

640. Support for the organized return of displaced families, mainly consisting of children and adolescents, took the form of the provision of food, tools, seeds and infrastructure in their home areas (schools, health centres, irrigation canals, etc.). The return of 4,000 persons to 25 communities in the departments of Ayacucho, Huancavelica, Apurimac and Junín was organized. In addition, multisectoral support was given by State agencies to the communities concerned.

641. Health and education services and sports and recreational activities are organized for returning families and children. Assistance was given by PAR to 34,500 children in 1994 and 1995, to 12,600 children in 1996 and to 12,000 children in 1997.

642. At camps organized for them, displaced children are given pamphlets with information on human values and on practical subjects. Between 1993 and 1996, 9,000 children attended these camps; for 1997 an attendance of 11,000 is anticipated.

643. In agreement with the Centre for Population Welfare and Development (CEPRODEP) and in order to deal with the problem of children in conflict situations, a situational analysis was made of the effects of violence on children. There is currently a project "Promotion of resilience in Quechuan children affected by political violence", which has reached 800 children between 8 and 12 years of age in the communities of Ayacucho.

644. Cultural activities have been organized such as workshops at which children and adolescents can acquire useful skills and which were attended by 8,191 children and adolescents between 1994 and 1995. In coordination with PRONAA, food aid is being provided for the activities involving the population.

645. PAR has a project entitled "Social support for the comprehensive development of children and adolescents - ADINA", which consists of activities and actions to improve living conditions for the most needy sectors of society. It has three components:

- Sports and recreation component, providing coaching in the basics of football and volleyball, so as to promote the all-round formation of the personality of children and adolescents, encouraging responsibility, solidarity and interaction with family and community. This project component had the largest number of participants. Sporting events have been organized, as well as other events involving healthy competition.

- Productive workshop component, providing instruction and training in useful activities, developing aptitudes, skills and dexterity to encourage work, creativity and productivity. The goal is for participants to acquire a lucrative alternative occupation.

- Youth camp component, designed to protect and assist children and young people from the marginalized sectors, as a response the youth problem. The goal is to give participating children an opportunity to engage in recreational and educational activities which promote peaceful coexistence and foster a critical mentality. The participating children are between 10 and 14 years of age and are mostly children from hostels, children's homes and children's villages and street children. At the camps, workshops are organized to teach manual skills, playing of musical instruments and skills such as electrical work and carpentry. There is a component relating to child abuse and the rights of children and adolescents. Experience has shown that the camps are a good way of guiding adolescents and children, promoting responsibility and boosting self-esteem.

IX. EDUCATION, RECREATION AND CULTURAL ACTIVITIES

646. In the social sphere of education and health, there have been several attempts to introduce important changes in public policy, of which some were abandoned and others were forgotten. In this context, sectoral plans were supplemented by investment programmes which resulted in partial rehabilitation of the physical infrastructure in schools and medical centres and concentrated action to improve the quality of life of children and adolescents. Despite a larger allocation from the State budget, representing about one fifth of total expenditure, and although a large part of the budget is used to pay teachers' salaries, the budget is still inadequate to deal with the problems of educational quality.

647. In order to modernize and develop the education system, provisions have been enacted which introduce significant changes in the management and financing of education and improve the quality and coverage of education through public educational programmes and services. For example, a special programme has been created to improve the quality of primary education, by improving the quality of education processes, replacing and rehabilitating education infrastructure and modernizing the administration of education.

648. The goal of the social programmes being implemented in Peru is to improve the social and economic conditions of the population and especially of the more vulnerable groups such as children. This requires two important actions. Firstly, priority is given to the Prioritized Strategy for the Relief of Severe Poverty,31/ which seeks greater equity, through social investment, in order to create expanded opportunities and skills in the poorest sectors of the country, especially the most vulnerable groups. Accordingly, the Peruvian Government has decided to halve severe poverty by the year 2000. Secondly, the programme of basic social spending was initiated, under which spending is focused and prioritized. This involved the allocation of 40 per cent of the Peruvian national budget to the social sector in 1997. Of this amount, 45 per cent is allocated to the education sector, 20 per cent to the health sector and about 30 per cent to the relief of severe poverty. Priority is given to the satisfaction of basic needs by expanding and improving the quality of social services.

649. In recent years, annual per capita social investment has considerably increased. In 1996, it amounted to US$ 158, which is a thirteen-fold increase over the 1990 figure of US$ 12. There is also a continuous increase in the government budget allocation: the proportion of education spending over the last seven years has almost doubled from 12 to 21 per cent of total spending and from 2.1 to almost 4 per cent of gross domestic product (GDP) during the period 1990-1997.

650. The aim of the basic plan to improve social spending is to give the population access to improved basic services in the areas of health, education and justice. In the area of education, the goal was to improve educational services in the rural, marginalized urban and frontier areas, with emphasis on early and primary education, on the modality for minors and on literacy. The State also intervened to strengthen the education system through teacher training and support for improved academic performance by students, providing textbooks and educational materials. The priority given by the Government to social policies is reflected in the growing budget allocation for social sectors in recent years; this has doubled from 20 per cent in 1990 to 40 per cent in 1997.

651. In meeting the challenge of poverty relief, one requirement is the participation not only of the central Government and of each public sector but also of the private sector and of the population in general. There are many activities and programmes needing to be reviewed and merged, even without changing the existing channels through which the respective sectoral plans and guidelines currently pass. It will be easier to visualize many of the changes

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31/ Approved by Ministerial Decision No. 262-96-PRES.

required in ongoing social programmes and projects when specific systems or mechanisms of evaluation and monitoring have been put in place.

652. This chapter summarizes the most significant changes introduced in the education system and describes the current state of the system, the plans of the Ministry of Education, ongoing programmes of sex education, drug abuse prevention and literacy. Programmes in the last two areas are implemented by PROMUDEH and through the extensive efforts made by the State to provide additional support for the education system (food, health and infrastructure).

A. Situation with regard to the education of children and adolescents

653. In recent years, girls have had the same access to education as boys, as a result of the expansion of education throughout the nation. However, disparities still exist between departments and regions and girls are still social outcasts, especially in rural areas and often by decision of their parents.

654. During the period 1992-1996, school enrolment increased by 2.3 per cent annually, reaching a total of over 7 million children and adolescents enrolled in early, primary, secondary, special and vocational education. Having played an important role, the State is the principal provider of education services. The proportion of students enrolled at public schools is 83 per cent. In addition, because of the impetus given to the education of children under six years of age, early education has experienced the biggest growth in recent years, reaching an average annual growth rate of 6 per cent for institutional education and 9 per cent for non-institutional education (see table VII.1).

655. Despite the significant increase in enrolment, differences still persist between the various regions. For example, ENAHO 32/ found a national average of 24 per cent of children under six years of age attending school. However, the figure for Lima was 29 per cent, whereas in the northern mountain region it was only 13 per cent. A national average of 94 per cent of children between 6 and 11 years of age were studying but in Lima the rate was 97 per cent whereas in the northern mountain region it was 87 per cent. The enrolment rate drops to 87 per cent for adolescents between 12 and 16 years of age, while the gap mentioned above widened (93 per cent in urban areas and 66 per cent in rural areas).

656. The educational discrepancies are reflected in differences in the average number of years of schooling among females over 15 years of age. While in Lima the average is 9.3 years, in Huancavelica it is 3.2 years. Another indication is the high rate of illiteracy among girls between 15 and 17 years of age, which is still 5 per cent.

657. Efforts to improve the coverage and quality of education will have to continue, since the national average number of years of schooling is 8.7, instead of 11 years. Much remains to be improved in Peru, especially in the

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32/ INEI, National Household Survey (ENAHO) 1996, covering 20,000 households in urban and rural areas throughout Peru.

poorer areas. While in Lima the average number of years of schooling is 9.8, in departments such as Cajamarca and Amazonas lower levels are reported, of the order of 6.8 years.

Measures to recognize and guarantee the right of children to education and to equality of opportunity

658. Early, primary and secondary education is compulsory and guaranteed as a right established by the 1993 Peruvian Political Constitution, which specified that education is provided without charge at State institutions at the various levels, including higher education at public universities.

659. In addition, the 1993 Political Constitution states that "in order to ensure the widest choice in the educational offering and to benefit persons unable to meet the cost of their education, the law determines the method of subsidizing private education in every form, including community and cooperative modalities".33/

660. The Peruvian State also encourages the creation of education centres where these are required by the population and emphasizes the eradication of illiteracy. Similarly, it promotes bilingual and multicultural education, depending on the characteristics of the area concerned. An effort is made to preserve the various cultural and linguistic traditions in Peru.

661. The action of the Ministry of Education (MINED) is aimed at continuing modernization of the institutional and educational spheres, promoting change in the structure of the education system and improvements in the quality of education.

662. In 1995, MINED drew up the 1995-2010 Medium-Term and Long-Term Education Plan,34/ which specifies that the development of education in Peru should embody a coherent approach for the long term. The plan notes that the constitutional mandate consists not only of expanding access to free education by children and young people but that it is also important to improve the quality of education. For that reason, MINED has taken a series of initiatives which are only the first step in the Government's coordinated effort to improve the quality of Peruvian education, as the cornerstone of national development.

663. Education policy involves two main elements:

- In the long term, there is a need to encourage creativity and excellence in order to be competitive on the world market; and

- In the short term, there is a need to reduce poverty, and education plays a leading role in this connection.

33/ 1993 Peruvian Political Constitution.

34/ Peruvian Ministry of Education, Office of Strategic Planning and Evaluation of Educational Quality, executive summary.

664. The action of MINED is designed to consolidate institutional and educational modernization, by promoting change in the structure of the system and taking measures to improve the quality of education at all levels and in all regions of Peru.

665. The change in structure involves a commitment to achieve universal early education for the under-fives, curriculum reform in secondary education and design and development of the basic bachillerato.

666. The improvement of the quality of education is part of efforts to change the existing education model: the idea is to replace the traditional approach whereby education was conceived as instruction focused on the acquisition of skills by the students. In improving the quality of education in Peru, emphasis has therefore been placed on enhancing the students' access to information and particularly on providing educational materials for students as well as teachers.

667. In parallel, a strategy is being evolved to diversify the educational offering, by encouraging the establishment and development of pilot educational centres and innovative experiments. At the same time, emphasis has been placed on the modernization of managerial techniques at MINED and the various agencies in the education sector.

668. During 1996, the process of educational change continued.35/ The main important result of the institutional changes was the readjustment of the primary school curriculum. This will make it possible to modify the existing education structure based on a process of skills-oriented education and to extend the new curriculum to first grade and second grade and, as an experiment, to third and fourth grade in 1997. In addition, it is definitely intended to extend coverage of children between 5 and 11 years of age and to reduce the number of students who drop out and repeat grades.

669. In 1996, 23 per cent of all primary school teachers received training. Most of the first and second grade teachers were trained.

670. During 1996, 8,282,000 pupils were enrolled (7,871,000 institutional and 441,000 non-institutional). This represented an increase of 153,800 over the previous year. The State provided education to 83 per cent of Peruvian students. Enrolment in early education was 985,000, with an annual rate of increase of 3.1 per cent; enrolment in primary education (modality for minors) was 4,130,000, an increase of 1.3 per cent; enrolment in secondary education was 1,899,000, an increase of 1.9 per cent over the previous year.

671. Public education was provided by 267,716 teachers and 3,679 new teachers were recruited in 1977. Of this total, there were 22,816 in early education, 131,486 in primary education and 85,937 in secondary education. The largest increase in the number of teachers was for early education. It is estimated

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35/ Ministry of Education, Office of Strategic Planning and Evaluation of Educational Quality: "Annual evaluation of the operational plan of the Ministry of Education" - Central Headquarters.

that the number of students per teacher was 31.9 in Lima, and 25.7 nation-wide. This shows that students are more widely dispersed and that there are more students per teacher in rural areas.

672. In 1996, training was given to 106,116 workers at State-run education centres (teachers, directors and facilitators) for the various levels and modalities. A total of 40 per cent of teachers were trained. At the various levels, the proportions were: early education, 32 per cent or 5,456 teachers; primary education, 23 per cent or 18,273 teachers and 16,348 directors; secondary education, 31 per cent or 24,479 teachers. Purchases included 415,800 modules for students, 100,100 textbooks, over 165,000 reading primers and guides and 60,000 classroom library modules for the various levels. Teacher training was part of the process of modernization of the sector.

673. The most important achievements in the education sector were:

(a) Determination of the basic primary curriculum structure, theoretical teaching framework, student profile, study plan and basic skills;

(b) Revision of the curriculum for early education (five-year-olds and first and second grades of primary school), with a view to its general application in 1997;

(c) Preparation of teaching guides (4 parts) entitled "Suggestions and experiments for better learning", which cover basic concepts, programming and strategies for learning, areas of development and management of the education process;

(d) Preparation of methodology guides for teachers of first grade of primary school: general communications and mathematical logic;

(e) Design and approval of the programme of bilingual multicultural education;

(f) Preparation of the following documents: technical criteria for the design of school textbooks and exercise books for students; pedagogical technical criteria for the design and preparation of teaching guides; and organization and administration manual for classroom libraries and teaching materials module, for first and second grades;

(g) National competition for regional children's literature, for the selection and publication of an anthology of texts (fiction, poetry and entertainment) - six titles for first and second grades;

(h) Training of teachers in the special education and bilingual education modalities; a constructivist approach, with emphasis on techniques to offset each disability in the case of special education. Assistance in printing training material on ten topics;

(i) Innovative teaching experiments, conducted with international assistance, relating to curriculum design for early and primary education, mainstreaming of disabled children and transition to primary school.

674. The education reform project being implemented by the Peruvian Government is creating a new structure for the education system, which reflects modern thinking and responds not only to general criteria but also to specific needs of the community, providing top-quality education. In order to meet the huge challenges of growth, MINED has adopted a mission strategy consisting of the following steps:

- Promotion of individual development through comprehensive and ongoing training based on a culture of values, which will enable students to understand the world, influence their environment and preserve their identity;

- Improvement of the quality of life of Peruvians and creation of conditions for social development, involving science and technology, culture, physical education and sports, which will foster a permanent quest for excellence.

675. In a situation in which both economics and knowledge tend to accelerate the speed of transformation, MINED has to organize itself to deal with constant change, with instruments that will give it sufficient flexibility and adaptability.

676. The aim of the proposal is to encourage ongoing improvement processes, with attention to the following aspects:

- Linkage between education levels, in an attempt to reduce existing gaps and ensure a smooth transition so that the system works efficiently;

- Compatibility with the labour market, with attention to changes in the economic system and in business structures, as well as to the growing trend towards a relative decline in dependent employment;

- Updating of curricula. The curriculum will no longer have a fixed content of knowledge and will become a dynamic and flexible instrument; and

- Efficiency and flexible organization of the system to promote the improvement of the quality of education.

677. The principal elements of the reform proposal are universalization of primary education and improvement of its quality: universalization of early education, with the basic aim of facilitating the linkage between early and primary education in order to prevent problems due to above-average age at enrolment, repeating of grades and dropping out. This will increase internal efficiency throughout the system and make it possible to reduce overruns in educational costs.

678. In addition to promoting universal basic education, the improvement in the quality of primary education, which lasts for six years, will be geared to the development of learning skills through enrichment of the children's information environment, participation of teachers in training programmes and the improvement of infrastructure. It is also planned to redefine secondary

education, which would consist of four years, as the culmination of the compulsory basic education provided free of charge by the Peruvian Government. At the secondary level, attention will be concentrated on developing skills which will enable adolescents to affirm their personality, develop a critical awareness, increase their knowledge, understand technological advances and begin to prepare for the world of work.

679. There will be a programme of distance learning for rural areas, providing greater coverage and equity at this level. In addition, it is planned to create a bachillerato level of education, lasting two years, which would be optional and free of charge at public educational centres. The aim will be to give students the basic knowledge needed to do a job of work and prepare them for higher education.

680. With this aim, efforts are concentrated on improving the quality and efficiency of the system of basic education, providing one more year of pre-basic childhood training, rationalizing secondary education and creating a new bachillerato post-basic level.

Evaluation of the quality of education

681. One of the biggest challenges facing Peru is the creation of an education system which will promote the all-round development of the individual, train citizens able to exercise their rights and fulfil their duties and create conditions for future development. With this goal, efforts are being made to design a system for evaluating the quality of the education provided at education centres. The Ministry of Education is currently implementing a Project for the Evaluation of Academic Performance (CRECER), which is aimed basically at systematically and regularly evaluating the results achieved in certain primary and secondary grades, in terms of academic performance.

682. Activities under the CRECER project started in July 1995 with the study and analysis of the existing curriculum and preparation of instruments for evaluating mathematical and language skills, which were assessed in a pilot project for the fourth grade of primary school. At the same time, directors, teachers and parents at the education centres in the sample were questioned about key aspects of the education process. In 1996, nation-wide testing was conducted for the first time and, starting in 1997, natural sciences and history/social sciences were incorporated in the primary school curriculum and in the tests given to students in the fourth and sixth grades of primary school. Students in the fifth grade of secondary school will be tested in the areas of mathematics and language/literature.

Coverage of the school system in Peru

683. The results of the 1996 National Household Survey (ENAHO) show educational levels and school attendance.

684. The figures show an improvement in the provision of education to the population, demonstrated by the increase in the proportion of more educated persons and the reduction in the proportion of the less educated. The Survey revealed that, in the population over 15 years of age, the number of people with secondary and higher education increased from 56 per cent in 1993 to 61 per cent

in 1996; on the other hand, the proportion without education declined from 12 to 9 per cent over the same period of time.36/

685. With regard to the school-age population between 6 and 24 years of age, the proportion attending school is 71 per cent. Under-fives have an enrolment rate of 24 per cent, while the rate is 94 per cent for children between 6 and 11 years of age and 87 per cent for adolescents between 11 and 17 years of age. There are slight gender differences in school enrolment. Before six years of age, enrolment of girls is slightly higher than that of boys (25.2 per cent compared with 23.5 per cent); for the other age groups, the proportions are reversed and enrolment of boys is higher. This trend towards higher male enrolment increases with age.

686. Coverage has increased significantly, with high rates for primary and secondary education, although there are still children and adolescents outside the school system. The greatest effort is required in the area of early education.

687. There are still differences in school attendance among children and adolescents. More adolescent boys attend school, but below six years of age the proportions are reversed and more girls than boys attend school.

Timely enrolment

688. As part of its efforts to improve the quality of education, the Peruvian Government is striving not only to expand education coverage but also to reduce the number of children who start school at above-average age and the number who repeat grades and drop out. In this connection, as part of efforts to promote the rights of children and adolescents, PROMUDEH is involved in activities through the Ombudsmen for Children and Adolescents to ensure timely enrolment. The Ombudsmen are administratively attached to the PROMUDEH Division for the Welfare of Children and Adolescents and are active in promoting timely enrolment, especially of girls. Their activities include:

- Working with schools to identify cases of undocumented children;
- Enrolment of undocumented children;
- Actions to guide and inform the community at large about the importance of education in the development of children;
- Coordination with parents' associations to assist parents who do not have the means to pay the normal fees; and
- Dissemination of information in schools about the service provided at school.

36/ INEI, Peru: Educational characteristics of households, 1996.

Right to education and information

689. Investment in education enhances people's skills and provides opportunities for access to a better quality of life. Education is a fundamental right. Consequently, investment in basic education is considered to be a fundamental means to achieve social integration, reduce poverty and create good citizens.

690. There has been a substantial expansion of educational coverage in Peru. Among school-age children and adolescents, 56 per cent come from poor households and 27 per cent of these are severely impoverished, so that they are highly vulnerable and disadvantaged. Education will enable them to develop their talents and skills, so that they can earn more when they grow up. However, the cycle of poverty and exclusion may continue for a significant number of children who do not attend school (9 per cent of severely impoverished children between 6 and 11 years of age, or 10 per cent in the case of girls). For children between 12 and 17 years of age, this proportion increases to 23 per cent and in the case of girls to an even higher rate of 26 per cent.

691. Despite the increase in educational coverage in Peru, many children still do not attend school. One concern is the quality of education. According to the Ministry of Education, one out of four students has repeated a grade once and one out of three is above average age for his or her grade. There are still school drop-outs in society, numbering slightly over 100,000, and the problem is worse at the secondary level. School drop-out rates declined from 5.5 per cent in 1991 to 3.8 per cent in 1995.

692. One area requiring a special approach is the education of girls, especially those who live in poor households and in severe poverty, since they have the highest drop-out rates. Poverty, subordination and social exclusion are thus perpetuated from generation to generation. In addition, although the national averages show no difference between girls and boys, girls in rural areas leave school early and often do not reach the secondary level. The results of the 1996 national household survey show that 12 per cent of girls from impoverished households do not attend school; this is equal to 250,000 girls, of whom 151,000 are severely impoverished.

693. Girls in the rural mountain areas account for 41 per cent of the impoverished girls who do not attend school, or over 105,000 in absolute figures, of whom 70,000 are severely impoverished. Of these, 19 per cent are in rural coastal areas, 11 per cent are in the urban coastal areas and 10 per cent are in Lima.

694. Because of the conditions in which these girls grow up, their future development is jeopardized. Most probably, they will grow up to have a large number of children, many of whom will die before reaching one year of age, suffer from chronic malnutrition and have high rates of illiteracy.

Sex education

695. The Ministry of Education has a national programme of sex education and has achieved the following results:

- Formulation of a policy of demographic education;

- Preparation of five family and sex education guides for teachers and parents of children in the five grades of secondary school; these have been used nation-wide since 1996;

- Teacher training at 144 events held in 25 Peruvian cities;

- Training of 12,300 teachers at courses in family and civics, family education and civic education for minors in secondary schools;

- Training in sex education for social communicators; and

- Preparation of various types of educational materials such as portfolios for teachers and methodology guides for parents and literacy workers.

Prevention of drug use

696. The aim of the programme of drug abuse prevention is to encourage the population to play a conscious and organized role in drug prevention activities and efforts to improve the quality of life of adolescents and young people by promoting all-round health and family unity. As part of the prevention programme, relevant topics have been included in school curricula, in training and in dissemination and preparation of educational materials. Community work and social research have included the activities described below.

697. Secondary school curricula include topics, objectives and strategies concerning prevention of drug abuse. This started as an experiment in 1991 and is gradually being expanded to include all schools.37/ Starting in 1997, prevention themes were incorporated as an experiment in primary curricula and teacher training, as well as in assistance to minors who are already working.

698. In the gradual expansion of the drug abuse prevention programme between 1992 and 1996, 1,997 schools participated, 56,364 teachers were trained and 1,187,191 students were involved, 90 per cent of whom were attending State schools.

699. Training in participatory activities relating to prevention was given to 2,500 teachers in 54 Peruvian cities. Two international training workshops were held on prevention and community mobilization with the presence of State officials and private institutions involved in prevention work. Two training workshops on prevention were held for the media and one training workshop was held at a school for parents.

700. As regards information activities, three media campaigns on prevention were organized and videos were made using the winning songs from the festival "Peace, life and drug control" in 1992, 1993 and 1994. A contest for journalists was held on the theme "Peru, united against drugs". In the area of

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37/ Assistance was provided by the United States Agency for International Development (USAID).

community activities, four national song festivals on "Peace, life and drug control" were held in 1994 and 1995. The community participated in the most rapid world reforestation on No Tobacco Day.

701. In the area of research, two studies were conducted on the impact of training on teachers involved in prevention, as well as a national study on the attitude of Peruvian teachers towards drug use.

702. Various types of educational materials have been produced and many of them have been reissued four times. These include: methodological guides; training guides for teachers; compendia of additional reading matter; promotional work through schools and family and children's games; the Family: healthy features and risk features in connection with drug abuse. Posters, brochures, comic strips and bumper stickers were also printed.

703. With the establishment of PROMUDEH, the functions of the Commission for the Prevention of Drug Abuse were transferred. Consequently, PROMUDEH, through the Division for the Welfare of Children and Adolescents, is engaged in activities under the plan of work formulated in 1997. The multisectoral Commission to Combat Drug Use "CONTRADROGAS" is responsible for strengthening activities to combat drug use, support for the rehabilitation of drug addicts and replacement of coca leaf crops. This Commission has subprogrammes dealing with prevention and rehabilitation, joint prevention and rehabilitation subprogrammes, and supervision and evaluation subprogrammes.

Literacy

704. Since illiteracy, particularly female illiteracy, is a persistent problem in Peru, the Ministry of Education formulated the 1991-1995 national literacy plan, under which various actions and strategies were proposed to reduce illiteracy substantially. However, the actions had no effect. In 1994, a new literacy plan was formulated with updated basic concepts and strategies which take into account the country's cultural heterogeneity and linguistic diversity, the needs of users and the requirements of increased efficiency and participation in the life of society.

705. Within this new literacy programme, several activities were undertaken in the period 1993-1997. These included 411 training workshops, held nation-wide and attended by 16,250 persons including specialists, coordinators and literacy workers. Two types of literacy packages were prepared : one to be distributed to the 325,000 newly literate and one containing teaching material for literacy workers. In order to create an awareness of the topic among various groups, 1,625 posters on literacy were printed. The literacy network has been set up at the national level and technical training has been promoted for participants in literacy programmes, with vocational options such as dress-making, food preparation and organic gardening, in seven departments.

706. Activities under the literacy programme of a strategic nature, with sectoral priority given to rehabilitation and employment of the illiterate population, within the framework of poverty relief and equitable improvement of education quality, achieved the following results: decentralization of training of staff responsible for the implementation of the programme, with the participation of public and private bodies at the regional and local levels;

improved efficiency and management; and coordination of literacy work with training in employment options, reproductive health and national identity.

707. For the third consecutive year, appropriate educational material has been provided for each geographical area both to literacy workers and to students, in order to stimulate their attendance and to improve their level of learning, with a success rate of 80 per cent of participants. Efforts were made to achieve the mobilization, coordination and participation of the public and private sectors (health, SENATI, IPSS, universities, Rotary Clubs, churches and non-governmental organizations) in training activities and enrolment of volunteers for literacy work.

708. Literacy textbooks were revised, printed and distributed in Spanish, adapted to eight departments, with four textbooks in Quechua for the Andean region. The textbooks are written by literacy workers from the area, so that they are relevant and meaningful, reflecting traditions, local linguistic usage and needs of the surrounding environment.

709. Literacy specialists, coordinators and facilitators were trained at decentralized workshops. Illiterate women were trained in useful activities and family planning, so as to promote alternative forms of production and spread knowledge about reproductive health, responsible parenthood and national identity.

710. The 1996 National Household Survey (ENAHO) 38/ revealed one important fact: a trend towards a decline in illiteracy, which dropped from 12.8 per cent in 1993 to 10.7 per cent in 1996.

Table IX.1

Peru: illiteracy rates for persons aged 15 or over, by gender and area, 1993-1996

	1993			1996		
	Total	Men	Women	Total	Men	Women
National	12.0	7.1	18.3	10.7	5.4	15.7
Urban	6.7	3.4	9.8	4.6	2.0	6.9
Rural	29.8	17	42.9	24.3	12.6	36.0

Source: INEI, 1993 Population and Housing Census and 1996 National Household Survey.

711. As part of the "Education for life" project of the Ministry of Education, 39/ 1,458 literacy facilitators, 87 coordinators and 25 specialists

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38/ INEI, Peru: Educational characteristics of households, 1997. Based on the ENAHO results.

39/ Project financed by the Inter-American Development Bank, with technical support from UNICEF.

have been trained from the department of Lima and the region of Chanka, at 116 discussion workshops. At the same time, literacy videos, posters, murals and pamphlets were prepared.

712. In 1995, specific areas were identified for training of facilitators and literacy workers and bilingual and multicultural literacy projects were designed for the departments with the highest illiteracy rates in the Andean region (Cuzco, Puno, Arequipa and Piurra), giving priority to 55 severely impoverished provinces.

713. Within the Education for All programme, there is a project for the development and rehabilitation of indigenous women and illiterate rural women. The project takes into account the cultural and linguistic characteristics of the illiterate population; it has trained 350 literacy facilitators and prepared and distributed a book entitled "Multicultural bilingual literacy in the Chanka region".

714. In 1996, international cooperation 40/ resulted in: a study of alternative models of curriculum design, which made it possible to prepare specific curricula for each region or subregion; and training workshops for the production of diversified educational material for the regions to be used in literacy and post-literacy programmes. As a result of these projects, adjustments were made in the diversified Spanish textbooks and new Quechua textbooks were produced. Training was decentralized to the various geographical areas and workshops were held to promote the rehabilitation and employment of illiterate women in frontier areas.

715. Among the illiterate population aged 15 or more, mention should be made of the group of adolescents between 15 and 17 years of age who are unable to read or write and who represent 4 per cent of the national population. Illiteracy is more prevalent among girls (5 per cent) and in rural areas (9.4 per cent). The departments with higher development indicators have the lowest rates of illiteracy and there are hardly any differences in education between men and women (departments of Lima, Tacna and Moquegua). On the other hand, the departments with the highest rates of poverty have the highest rates of juvenile illiteracy, particularly among girls (departments of Huancavelica, Ayacucho and Apurimac). In some cases the rate of female illiteracy is three times the rate of male illiteracy and this trend is even more marked in the predominantly rural provinces, where the rate of illiteracy is over 30 per cent. This problem of juvenile illiteracy stems not only from the fact that, for economic reasons, adolescents do not pursue studies but also from the prolonged political violence which affected Peru for many years, precisely in the poorest departments, where the provision of education was cut back and the population migrated from the rural to urban areas.

716. Since 1996, the Government's literacy activities have been taken over by the PROMUDEH Division of Education for Development. In view of the complexity of this social problem, it has been decided to tackle it from several angles, which are linked with educational methods and economic, linguistic and cultural aspects.

40/ UNESCO contribution.

717. In this connection, literacy is considered as a process of acquisition and ongoing development of knowledge, skills, attitudes and values in all the dimensions of human life. The 1997-2000 National Plan of Mobilization for Total and Innovative Literacy has the following goals:

- Eradication of illiteracy in Peru, substantially decreasing the illiteracy rate from 10.5 to 4 per cent during the period 1997-2000;

- Promotion of literacy in order to create dynamic outlets for the all-round development of the target population and revitalization of their culture, as an expression of community spirit. Literacy focusing on learning needs and quality of life, providing different responses to the diverse social, cultural, ethnic and linguistic contexts; and

- Priority attention to female illiteracy.

718. In order to achieve these goals, a strategy has been adopted of promoting the participation of other entities in the public sector which are working with the communities. Agreements have been concluded with inter alia decentralized public agencies such as the Programme of Support for Resettlement, the National Food Aid Programme and Community Cooperation. It is also planned to increase the number of students per literacy worker.

719. In 1997, as a result of the programme activities, the number of persons acquiring literacy skills increased owing to the strategies pursued and to the greater number of literacy workers. See table 6.

Multicultural bilingual education (EBI)

720. The ethnic diversity of the Peruvian population is reflected in the fact that over 72 languages are spoken in the Amazon and Andes zones, which form 14 linguistic families. This cultural, linguistic and ethnic diversity makes Peru a multicultural, multilingual and multiethnic society.

721. According to the 1993 Population and Housing Census, the educational level of the indigenous communities in the Peruvian Amazon is quite different from the average level among other rural inhabitants. The proportion of the indigenous population with no education or with only early education is 32 per cent, while 49 per cent have attended primary school and only 15.5 per cent have received secondary or higher education. If one considers the population between 6 and 17 years of age (period during which formal primary and secondary education should have been completed), one finds that in the indigenous communities 67 per cent are in one of the grades of primary school, only 7 per cent succeed in moving on to secondary school and 26 per cent are outside the education system. If a comparison is made between the 6 to 11 age group and the 12 to 17 age group, it is found that 75 per cent of the first group are at primary school and 25 per cent are outside the school system; in the second group, 71 per cent are

at primary school and only 17 per cent are at secondary school. The proportion of children who start school at five years of age is 9 per cent.41/

722. These figures reflect the fact that a large number of children drop out, repeat grades and start school late. A study of the Amazon region 42/ indicates that the participation of children in the family's farming activities interferes with school attendance and affects academic performance. In addition, the problem is worse for girls, who perform domestic chores at an early age. These factors are reflected in under-performance and drop-out rates.

723. The data reveal that in 1993 13 per cent of the Peruvian population were illiterate, while the proportion rises to 33 per cent in the case of the indigenous communities. Illiteracy rates are higher among women (44 per cent compared with 23 per cent for men).

724. Education activities for the indigenous populations in Peru are governed by the national policy of multicultural education and multicultural bilingual education, formulated in response to the country's socio-cultural, linguistic and ethnic plurality. The Multicultural Bilingual Education Unit (UNEBI) within the Ministry of Education establishes guidelines under this policy, which covers all levels and modalities of the national education system and which places the education of the indigenous peoples within the context of the general concept of education. The curricula are diversified, so that Spanish speakers learn about the languages and cultures of the indigenous peoples, who can be educated in their indigenous language in several communities. In this framework, projects and programmes of multicultural bilingual education are being implemented.

725. The Ministry of Education is currently engaged in the following activities:

- In the area of research, studies have been made on socio-cultural aspects affecting EBI and on socio-linguistic aspects of this education;

- In the area of curriculum design, a programme has been evolved to link early and primary education and the cycle of multicultural bilingual education;

- Educational materials were prepared for executing agencies;

- The National Plan of Multicultural Bilingual Training (PLANCAD-EBI) was prepared for the training of teachers through action to monitor the use of the model curriculum for training and upgrading of bilingual education teachers; and

- An announcement has been made about the competition for children's stories in indigenous languages.

41/ INEI, "Peru: The population of the indigenous communities of Amazon", Lima 1997.

42/ Barclay F. and Santos "General situation of children in Amazonia", 1991.

726. According to estimates,43/ approximately 105,000 students are receiving multicultural bilingual education in the first cycle of primary education. This estimate was made by the executing agencies at the training workshops held under the National Plan of Multicultural Bilingual Training.

Educational costs to families

727. Although education is free of charge in Peru in the State system and public spending on education is very high, families make an important contribution to the financing of education. Peruvian families which enroll their children in State schools have to pay for uniforms, materials and transportation. The costs incurred by the family are not very high per pupil, but the combined amount may be overwhelming and difficult for unemployed parents to meet.

728. On the basis of data from the 1994 ENNVID,44/ it is estimated that the national average annual cost of education in the private sector was US$ 281 per pupil for early education, US$ 456 for primary education, US$ 478 for secondary education, US$ 542 for non-university higher education and US$ 696 for university higher education. In addition, it was found that costs are greater in households with higher education levels, and higher in Lima than elsewhere in Peru.

729. This is substantially higher than the costs incurred by families whose children are in the public education system, which supplement the costs paid by the State. In this case, the average annual cost per pupil to the families was about US$ 49 for early education, US$ 41 for primary education, US$ 92 for secondary education, US$ 177 for non-university higher education and US$ 192 for university higher education.

730. It should be emphasized that families with children in public schools make a considerable effort throughout the educational process, even though in accordance with the 1993 Political Constitution the State guarantees free early, primary, secondary and higher education at public education centres. Of the total costs of US$ 254 per child for early education, 19 per cent comes from the families and the rest is provided by the State. At primary and secondary levels, total expenditure is US$ 133 and US$ 219 per pupil, of which 24 per cent and 30 per cent are borne by the families. The costs to families increase at the higher educational levels. In private schools, they are almost double the cost per pupil in public schools.

731. The 1996 ENAHO compiled information on the amounts spent by Peruvian families on their children's education. Of the education costs, the highest are for supplies and uniforms; enrolment fees and parents' association dues are lower. It was found that 37 per cent of families did not pay for their children's enrolment (44 per cent at the primary level and 27 per cent at the

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43/ It is planned to train 30 h]students per teacher; 2,351 were trained in 1996.

44/ Saavedra, Jaime and Melzi, Roberto in "Financing of education in Peru", GRADE 1997.

secondary level). One fourth of the families spent less than US$ 4. In addition, 51 per cent of families in rural areas did not pay anything and 40 per cent paid less than US$ 4. This shows that public expenditure on education is higher in rural than in urban areas, where there is more poverty. Similarly, it is noted that rural families spent much less than urban families on school supplies. Families incur higher costs for secondary school students than for those at primary school.

Supplementary government programmes

732. The impact of the Government's actions has been different for students at the various levels. The social programmes benefited mostly children receiving early and primary education and, to a lesser extent, those receiving secondary education. These actions included food aid, health care and school infrastructure projects. The 1996 ENAHO data show the effects on Peruvian households of the programmes implemented at education centres.

733. Food aid is the programme which has had the greatest impact on the child population. It was found that 43 per cent of children receiving early education, 42 per cent of children receiving primary education and 5 per cent of children receiving secondary education had benefited from such aid. In addition, programmes to provide school uniforms and/or shoes reached 11 per cent of students and about 5 per cent of children receiving early and primary education had been given school supplies.

734. With regard to health services, mention may be made of the fact that dental care was provided to 6 per cent of children receiving early education and 8 per cent receiving primary education, while about 6 per cent had received some kind of medical care. There are first-aid centres at 19 per cent of educational centres and at 28 per cent of educational centres in urban areas. It is also found that social assistance has focused on the poorer areas, particularly the central and southern mountains and the southern coast.

735. Efforts to improve the school infrastructure, particularly in State schools, are clearly visible. Sanitary conditions are better in the urban centres: 90 per cent of educational centres have water and drainage and 4 per cent have only water. In the rural areas, 23 per cent have both and 22 per cent have only water. The situation with regard to electric lighting has also significantly improved: three quarters of Peruvian schools have electric lighting, almost all in urban areas. In rural areas, it was found that only 35 per cent had electricity and that 53 per cent of schools in rural areas do not have electricity.

736. Social assistance has focused on the areas with greatest poverty such as the central and southern mountains and the southern coast.

B. Recreational activities

737. Since 1992, national school sports competitions have been held in Peru. State and private schools join together in an activity that is becoming increasingly important, because it reaches large numbers of young people in a country involved in an enthusiastic search for ways of enriching future generations of citizens.

738. The Ministry of Education and PROMUDEH's Peruvian Sports Institute (IPD), with the help of the Association to Promote School Sports (APRODESCO) and private industry, organize sports and recreational activities with the goal of inter alia promoting the all-round development of schoolchildren.

739. The municipal governments are also involved in this important national movement, joining the private associations active in the school environment in a joint effort to persuade young people to make exercise a life-long habit.

740. The 1993 and 1994 campaigns had a total participation of 1,316 and 2,203 schools and 36,900 and 102,000 persons respectively were registered for sporting events. Before competing, they took part in events involving five sports in the first phase (chess, athletics, basketball, football and volleyball) and a sixth additional sport (table tennis) in the second phase.

741. As a public service body, PROMUDEH's Peruvian Sports Institute organized the national school sports competitions as an appropriate way of meeting its social and sporting objectives: using this very agreeable activity to teach tens of thousands of participating children to make good use of their free time; enabling young people to better their quality of life by improving their physical and psychological condition and their health; promoting the integration of schoolchildren from the most diverse social and economic backgrounds, who participate in the games with the same rights and obligations; providing options which build up personal experience in the all-round formation of individuals; and creating opportunities at which there are numerous occasions on which sporting talents can be displayed.

742. In 1992, advance goals were set for the national school sports competitions in an eight-year programme starting in 1993 and continuing until the year 2000. The first goal was deliberately difficult: an initial participation of 10 per cent out of a total of 14,620 secondary schools, increasing at a rate of 5 per cent a year until 1999 and at a rate of 10 per cent in the year 2000, then stabilizing and remaining at 50 per cent of Peruvian secondary schools.

743. The results obtained in the first two years were encouraging and showed that the growth projection was realistic. Participation was 9.1 per cent in 1993 and 15.04 per cent in 1994, indicating that in 1995 approximately 2,920 schools will participate, representing 20 per cent of the schools which are the target for this sporting/training activity.

744. Because like any other activity this is process-oriented, it is clear that the projection for the national school sports competitions was made without immediate expectations but with the firm intention that as the project grew it would encompass, in addition to the development of the skills and talents of the young participants, the ingredients mentioned as goals in this brief description of what the activity already represents for the entities and agencies which are doing so much to promote its success.

745. The effort made by IPD, jointly with the Ministry of Education and with the collaboration of the private sector, will make it possible to expand the project. One of the institutions supporting these activities is the Association to Promote School Sports (APRODESCO). The goal of this civil association is to

assist the Peruvian State in the task of providing opportunities for the entire student population, both at school and at university, to engage in physical and/or sports activities for recreation, maintenance or competition, so that these activities will become a life-long habit for children and young people. The activities have the following objectives:

- To encourage children and young people to make good use of their free time, discouraging unhealthy options such as drugs, alcohol, tobacco, vagrancy, etc;

- To improve the physical and psychological health of children and young people, which will result in a healthy lifestyle - in other words, an improvement of the quality of life of this segment of the population;

- To assist the all-round development of children and adolescents, fostering in them a sense of responsibility, team spirit, conscious feeling of respect, discipline and desire to do their personal best;

- To cultivate, starting in childhood, integration of Peruvians among themselves, by organizing large-scale sports activities with the participation on an equal footing of children and young people from different social and economic backgrounds, as part of a process of modifying the social behaviour of future generations; and

- To promote and support the development of the sports infrastructure in communities throughout Peru, especially those with fewer resources, in order to facilitate the setting and achievement of institutional goals.

X. SPECIAL MEASURES OF PROTECTION

746. This last chapter describes the existing situation with regard to the application of special instruments for the protection of children. It refers to children or adolescents who are in exceptional situations, to those affected by armed conflict or recruitment for military service and to those in conflict with the law and the institutions involved in the administration of justice for adolescents. A brief description is also given of the penalties established for minors, of the institutions responsible for the social reintegration of children and adolescents and of the legislation on child and adolescent labour.

A. Children in exceptional situations

Refugee children

747. Out of the total refugee population, 47 per cent are children and adolescents, who may be divided into two groups: children and adolescents who are part of their own groups or families (parents and/or single mother or father), and children and adolescents who enter Peru alone.

748. Both groups come under the protection of the United Nations High Commissioner for Refugees (UNHCR) and, under the regulations governing the legal

status of refugees and perscns seeking political asylum in Peru (Supreme Decree No. 001-85-RE), must be entered in the general register of aliens when they reach 11 years of age, because descendants have the same right to refuge as the registered person.

749. Refugee children and adolescents receive from the State the special protection recognized in article 7 of the Peruvian Political Constitution.

750. The international legislation and procedures applicable to children and adolescents who are refugees or who apply for refugee status are embodied in the Geneva Convention. This consists of:

- The Convention relating to the Status of Refugees of 28 July 1951, approved by the Peruvian Government by Legislative Decision No. 15014 of 16 April 1964 and in force since 21 March 1965; and

- The Protocol relating to the Status of Refugees of 31 January 1967, which updates the above-mentioned Convention, was approved by Legislative Decision No. 23608 of 1 June 1963.

751. The Peruvian legislation on the subject consists of: Supreme Decree No. 001-85-RE of 25 January 1985 on the legal status of refugees and persons granted political asylum in Peru; and the Manual of Procedures for Determining Refugee Status, prepared in pursuance of the 1951 Geneva Convention relating to the Status of Refugees and its 1967 Protocol.

752. These provisions are applied by the Ad Hoc Standing Commission for Refugees to all applications submitted by the Peruvian Catholic Commission on Migration, which is the organ in Peru representing the United Nations High Commissioner for Refugees.

753. Once a child or adolescent has obtained refugee status, he or she receives an identity document (alien card) which will provide protection, for example from detention during police raids. Refugees are at an advantage compared with Peruvian nationals, who now receive a military card at the age of 17 and an electoral card upon attaining their majority (18 years).

754. In the case of children, most applications for refugee status are submitted by the parents; once they have been granted refugee status, this is automatically extended to their minor children. With regard to the exercise of rights, refugee children receive protection from the Peruvian State, possess civil, social and cultural freedom and accordingly are able to study at State schools without any problem and to engage in any type of activity, except as prohibited by the 1951 Convention.

755. The Peruvian Catholic Commission on Migration, which represents UNHCR in Peru, organizes Spanish courses for refugees whose mother tongue is not Spanish. It also provides financial aid to those who are waiting to be granted refugee status.

756. At present there are 1,028 refugees in Peru, including 469 children and 559 adults. The children include 248 girls and 221 boys, according to data of the Catholic Commission on Migration.

Children and adolescents affected by armed conflict

757. There are very few such cases and the only ones which occurred were related to the conflict with neighbouring Ecuador on territorial limits. In 1994, in the departments of Tumbes and Piura on the frontier with Ecuador, persons were affected not because they were in a place of armed conflict but because Ecuador had laid anti-personnel mines in areas where civilians travelled. In order to prevent accidents, a television campaign was launched with the help of UNICEF in which 30-second "Don't touch" messages alerted the population in general and especially children and adolescents to the dangers posed by mines.

758. In this connection, mention may be made of the fact that terrorist violence, which still persists in Peru although on a smaller scale, has orphaned a number of children and adolescents and caused large groups of people to move from their places of origin to the cities in search of safety and support. It is estimated that in 1993 the displaced population numbered 600,000 persons (125,000 families), of whom 60 per cent were children and adolescents.

759. In order to assist this population, and in pursuance of its policies of reducing severe poverty and promoting social development, the Government deemed it necessary to step up assistance to displaced families and to communities affected by terrorism, through the project of support for resettlement, with the aim of assisting the population affected by terrorist violence and particularly the displaced population returning to their places of origin.45/

760. This project was launched at the end of 1993 and expanded to include development of emergency zones when it was incorporated in PROMUDEH in 1996. It is extending its approach and activities, adopting integrity and gender criteria. The project is helping to consolidate the process of pacification in Peru and gradually to reduce poverty in the target population.

761. The project has broad geographical coverage. However, priority is given to the departments of Ayacucho, Apurímac, Huancavelica and Junín, precisely because they were the most affected, proportionally, by the displacement of families (85 per cent of the total). It currently covers 12 departments, 52 provinces, 296 districts and over 1,000 population centres. Among its activities to help children, mention should be made of the following.

762. Assistance to returning families with children and adolescents consisted of the provision of food, tools, seeds and infrastructure at their zones of origin (schools, health centres, irrigation canals, etc). Health and education services and sports and recreational facilities were also provided.

763. A total of 4,000 persons returned to 25 communities in the departments of Ayacucho, Huancavelica, Apurimac and Junín. In addition, multisectoral support was provided to the State bodies in their respective communities.

764. As part of PAR, social support for the all-round development of children and adolescents (ADINA) consists of activities and actions which help to improve

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45/ PAR, Report on the employment of children and adolescents, 1997.

living conditions in the most needy sectors of society. There are three main areas of activity: recreational sports, which promote the all-round development of the personality of children and adolescents; productive workshops, providing training in useful activities; and youth camps designed to protect and assist children and young people from marginalized sectors, in response to the youth problem.

Action taken

765. It is the armed forces which initially deal with children and adolescents affected by armed conflicts resulting from terrorist acts, by taking the following actions:

- Grouping displaced children and adolescents and evacuating them to special camps, premises of education centres or other facilities and temporarily meeting their basic needs for food, clothing, health, transportation, etc.; they are subsequently handed over to the competent authorities of the court of equity (family courts), units authorized by PROMUDEH or in some cases specialized Red Cross or human rights bodies; and

- Depending on the circumstances, participating in civic activities, giving instruction to displaced and/or evacuated children, particularly in remote areas.

766. The family courts are competent to decide the status of children or adolescents. They order a protection investigation on behalf of the child or adolescent so that the necessary search can be conducted to locate their relatives. If they have no relatives, children will be placed in facilities where they will be given the comprehensive assistance necessary for their normal development.

767. There are several government agencies such as INABIF, which is part of PROMUDEH, and the Peruvian Foundation for Children, which is accountable directly to the Office of the President of the Republic and is headed by the First Lady of Peru, which have decentralized homes throughout Peru, as well as approximately 15 non-governmental agencies providing comprehensive assistance to children and adolescents orphaned as a result of armed violence.

768. In order to assist these children and adolescents affected by terrorist violence, in 1994 the Ministry of Health, with the support of UNICEF, set up and implemented seven psychological intervention modules in the departments of Puno (Puno, Huancané, Melgar and Azángaro) and Ayacucho (Huamanga, Huanta and Cangallo) for which 200 health professionals and technicians were trained at eight workshops. These modules provide mental health care at the first level of the primary network and promote healthy life styles, improving the psychological and social development of the population. The modules were used primarily at education centres where there was a high incidence of problems such as crisis and post-traumatic syndromes, anxiety, depression, poor academic performance, aggressive behaviour, disturbance of family roles, and alcoholism.

769. The Ayacucho Regional Division of the Ministry of Health, also with assistance from UNICEF, implemented a project known as "Education for life" in

the department of Ayacucho (Huamanga, Huanta and Cangallo), which were the places most affected by terrorism. This project was subsequently expanded to include the province of Canas-Cuzco. The aim of this project was to train teachers in ways of instilling self-esteem and appreciation of cultural identity in children and adolescents in these zones of conflict. General information (knowledge of their rights and values) was provided to 20,000 children and adolescents, specific guidance was given to 12,000 children and adolescents and psychological follow-up was given to 4,000 children and adolescents through the modules of psychological assistance of the Ministry of Health.

770. Under the project "Education for life", the following activities were carried out in the departments of Ayacucho and Cuzco. In Ayacucho, 4,000 teachers were trained in ways to strengthen self-esteem among primary school children; 4,000 special curriculum modules were produced incorporating self-esteem topics; and three departmental workshops were held for the training and follow-up of primary education specialists. In Cuzco, three training workshops were organized for 240 primary school teachers and 2,000 "Education for life" texts were published for primary school teachers.

771. The scourge of terrorism is now almost entirely under control: calm is gradually being restored and the constant daily fear is receding. In 1989 and 1992, there were more subversive activities. The departments of Ancash, Ayacucho, Huancavelica, Huánuco, Junín, Lima, Pasco, Puno and San Martín were most affected by the violence.

772. In Supreme Decree No. 072-93-PCM of 6 October 1993, the State created the project of support for resettlement (PAR) in order to assist the population affected by terrorist violence and primarily the returning displaced population, by providing food, tools, seeds, infrastructure (schools, health centres and irrigation canals), etc.

773. In pursuance of its policies of reducing severe poverty and promoting social development, the Government deemed it necessary to step up assistance to displaced families and to their communities affected by terrorism and converted PAR into a National Programme of Support for Resettlement and Development of Emergency Zones.

Promotion of resilience among Andean children

774. Since it was children and adolescents who suffered most from the effects of violence, suffering emotional setbacks and experiencing increased learning problems at school, it was found necessary to take some action to improve this situation. Accordingly, in coordination with the Centre for Population Welfare and Development (CEPRODEP), PAR set itself the goal of eradicating war-related stress in Andean children in the communities of Ayacucho. The results were encouraging, since the experiment proved that it is possible to reverse emotional problems through activities involving games and displays of affection towards the children, with the active participation of the parents and members of the community.

Recruitment for military service

775. Decree Law No. 264 (Act on Compulsory Military Service) and its regulations in Supreme Decree 072-84 PCM of 31 October 1983 and 16 November 1984 respectively govern compulsory military service.

776. Article 5 of the Act on Compulsory Military Services defines "military age" as the age at which men and women are obliged to perform compulsory military service:

> "Article 5. Men between 18 and 50 years of age and women between 18 and 45 years of age shall be obliged to comply with this Act, in accordance with its provisions and regulations; this period shall be known as "military age"."

777. According to these legal provisions, registration for compulsory military service takes place, for men, between 2 January and 31 March and, for women, between 1 April and 30 June of the year in which they attain the age of 17 and the service is performed as of 18 years of age. It should be specified that not all those who are registered perform compulsory military service but only those whose names are drawn by lot.

778. There are two types of active military service: billeted, in which military service is performed full time at units or bases for the duration prescribed by law; and non-billeted, at the discretion of each branch of the armed forces, in which military service is performed through intermittent periods of instruction and training at units or bases.

779. Exceptionally, in accordance with the provisions of article 55 of Decree Law No. 264, Peruvian-born men may perform active military service at 16 years of age with the requirements laid down in the regulations to the law. These requirements for early military service are specified in article 106 of Supreme Decree 072-84-PCM (Regulations to the Act on Military Service), which reads as follows:

> "Article 106. The requirements for early performance of compulsory military service shall be as follows:
>
> - Completion of the fifth year of secondary education, attested by the relevant certificate;
> - Non-married status, attested by a document signed by three Peruvian citizens indicating their habitual domicile;
> - Good behaviour, attested by the police record certificate issued by the Peruvian Investigation Police;
> - Attainment of the required age, attested by the birth certificate;
> - Authorization from the parent or guardian, attested by a legalized written document; and
> - Successful completion of the psychological aptitude test."

780. In conclusion, persons under 16 years of age may not be recruited and there are few cases in which persons under 18 years of age are performing military service; such service is voluntary and the procedures and requirements specified in above-quoted article 106 must first be fulfilled.

B. Children in conflict with the law

Administration of juvenile justice

781. Any adolescent accused of breaking the law is considered innocent until proved guilty and must therefore be treated like any other person, with respect for his or her rights guaranteed under the Constitution and the Children's and Adolescents' Code.

782. It is hoped that, if adolescents are treated with respect, this will strengthen in them respect for the rights and freedoms of others. Even though the policy of correction still exists, adolescents must understand that, in the same way as they have rights, other people also have rights.

783. After the case has been studied and before the adolescent makes a statement, there is generally a discussion between the adolescent and his or her parents during which they try to make their child reflect on what is happening and to understand how unfortunate it is and urge the child to tell the truth. In addition, parents are urged to assume their role responsibly and to help their son or daughter to overcome the problem.

784. It is specifically established that the trial of adolescent offenders should be considered as an opportunity given to them now that they are young and that they may modify their behaviour. If adults commit the same act, they will be given no special opportunities or treatment.

785. The age of the adolescent and the circumstances in which the offence was committed are always taken into account. The Code therefore specifies that placement shall be used only as a last result; normally adolescents remain with their parents but must be aware of their responsibility and conform to certain standards of behaviour depending on the case concerned.

786. For example, in the case of injuries caused by a traffic accident in which the vehicle was driven by the adolescent offender, the court acting in the best interests of the child, and bearing in mind that he was studying at university and that this was the first time that he had broken the law, decided that the offender's parents should pay damages and that the adolescent should perform community service as a rehabilitative measure. After attending driving school and learning the traffic regulations, the offender had to pass on this knowledge at schools and youth centres, recounting his experience; thus there was no prejudice and the adolescent was able to continue his studies.

787. The treatment of adolescent offenders changed radically with the promulgation and entry into force of the Children's and Adolescents' Code, which incorporated much of the Convention on the Rights of the Child. Accordingly, in any trial of adolescents these principles are respected.

788. In order to guarantee an appropriate trial and to ensure its impartiality, a representative of the Public Prosecutor's Department and a defence lawyer must be present; otherwise the proceedings are null and void.

789. Significant progress has been made in Peru in the area of legal norms and legislation but in some inland areas there is not full compliance, because of

ignorance of the law. For that reason, training and awareness campaigns are continuing for professionals working with children, precisely in order to reach all parts of Peru, especially the most isolated places.

790. The progress achieved in the implementation of article 40 of the Convention on the Rights of the Child is reflected in the adoption and entry into force of the Children's and Adolescents' Code, which embodies the principles established in the Convention and other international instruments. The following instruments have been adopted: United Nations Standard Minimum Rules for the Administration of Juvenile Justice ("Beijing Rules") and the United Nations Rules for the Protection of Juveniles Deprived of their Liberty.

791. The Peruvian Political Constitution guarantees these rights in paragraphs 24 (a) and (d) of article 2:

> "Article 2, paragraph 24. Every person has the right to personal freedom and security. Consequently:
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> - No one is obliged to do what the law does not mandate or prevented from doing what the law does not prohibit;
>
> - No one may be tried or sentenced for an act or omission which, when committed, had not previously been prohibited by the law in an express and unequivocal manner as a punishable offence and no one may be punished by penalties not provided by law.
>
> - Every person is considered innocent so long as his or her responsibility has not been judicially determined."

792. The State guarantees due process and establishes as a peremptory rule the application of the Political Constitution (article 139), international agreements and the Convention on the Rights of the Child, such as the following:

- The State has the exclusive authority to administer justice, through the Judiciary;

- The right to have information regarding the adolescent's arrest given to the parents, the court and the procurator (art. 211);

- The right to a special judge; an adolescent accused of a criminal offence shall be tried by a family judge specializing in criminal matters;

- The right to defence; starting from the police investigation stage, in the procurator's office and the special court, the adolescent is entitled to counsel, even if, because of the large number of complaints, there are not enough court-appointed defence lawyers; and

- Right to be tried within a reasonable period of time; the Children's and Adolescents' Code has established time limits for the conclusion of the trial: 50 days if the adolescent is in detention and 70 days if the adolescent is subpoenaed.

793. An adolescent accused of an offence must be brought before the special procurator within 24 hours of being arrested, with the police report. If there are sufficient grounds for prosecution, the procurator proceeds with the complaint and hands the adolescent over to the judge for determination of his or her legal status.

794. On the basis of the procurator's complaint, the judge will issue a decision, with written substantiation, declaring that proceedings will be instituted and will arrange for the adolescent to make a statement in the presence of his or her parents, a lawyer and a procurator. The judge will also decide on the procedure to be followed which may be either release in the custody of the parents or responsible persons or preventive detention (art. 225 of the Children's and Adolescents' Code).

795. Once proceedings have been instituted, the judge must set a date and time for the preliminary hearing, which must be held within 30 days following the judge's decision and will take place in the presence of the procurator, the defence lawyer of the adolescent offender, the adolescent, the parents or responsible persons and the aggrieved party. At the hearing, all statements are taken, admissible evidence is offered by the adolescent and by the aggrieved party and any evidence uncovered during the proceedings is heard. The hearing concludes with the summing up by the aggrieved party and the adolescent's lawyer and the adolescent's statement in his or her own defence. All this must be done at one hearing. Absence of the procurator or of the adolescent's defence lawyer renders the proceedings null and void (art. 227 of the Code).

796. After the single preliminary hearing, the file will be transmitted to the special procurator's office for an opinion, on the basis of which the judge will pronounce sentence. The sentence must be notified to the adolescent, the parents or responsible persons, the lawyer, the aggrieved party and the procurator. The sentence may be appealed, if an appeal is authorized, and the appeal must be submitted to the family court within 24 hours of the authorization (art. 234 of the Code).

797. Within 24 hours of its receipt in the family court, the file is transmitted to the senior procurator's office for an opinion within 48 hours. After return of the records, a date and time are set for the appeal to be heard within five days and sentence must be pronounced within the following two days; no deferments are permitted. The hearing is closed to the public; in addition, the parents, the aggrieved party, witnesses, experts and any other persons considered necessary may be ordered to appear at the hearing.

798. It should be noted that initially, when the Children's and Adolescents' Code had recently entered into force, the judges complied with the time limits. However, with the increase in the workload of cases for adolescent offenders as well as civil and guardianship cases, it became almost impossible to comply, because in many courts a single hearing took two or three sessions and lasted more than one week, which lengthened the proceedings. In addition, in the case of detained adolescents, late submission of reports by the multidisciplinary technical team and failure to bring the adolescents to court on the day of the hearing further delayed the proceedings.

799. Because of this growing problem, an evaluation was made of the status of the files of adolescent offenders and particularly of those being held in preventive detention. Meetings were then held between representatives of INABIF and the Judiciary in order to expedite the technical reports. In addition, the Judiciary arranged for family judges to go to the diagnostic and rehabilitation centres so that hearings could be held on the scheduled dates and frustration thus avoided.

800. In order to reduce court backlogs, four temporary family courts were established. This had the effect of accelerating proceedings. Lastly, it was decided to designate three of the 14 family courts to deal exclusively with cases of adolescent offenders. Similarly, as part of the reforms introduced, the diagnostic and rehabilitation centres were transferred to the Executive Secretariat of the Executive Commission of the Judiciary in pursuance of Decree Law No. 866 of 29 October 1996. The actual transfer of the centres took place early in 1997.

801. Adolescents (or anyone else) arrested for an offence against criminal law who do not speak or fully understand Spanish are entitled to an interpreter, who shall be provided by the State without prejudice to the right of the adolescent or his or her relatives to appoint an interpreter at their expense.

802. All proceedings involving a child or adolescent are closed to the public and may be attended only by the persons directly involved. The media are strictly forbidden to mention a minor's name or identify the minor. Article 74 of the Children's and Adolescents' Code states: "If a child or adolescent is involved in the commission of an offence as perpetrator, participant or witness, his or her identity shall not be revealed in any information media. In addition, the judge shall report to the special procurator any persons who violate the secrecy of investigations relating to children and adolescents."

803. This rule has been strictly respected until now and there have been only two cases of violation, in which the information media concerned were reported by family judges and a large fine was imposed.

Institutions involved in the administration of juvenile penal justice

804. The Children's and Adolescents' Code, which was promulgated in December 1992 and entered into force on 28 June 1993, specifies in titles I and II of book IV the authorities and institutions involved in the administration of juvenile justice and the supporting organs. They are as follows. Family divisions were established by Administrative Decision No. 036-93-CE-PJ dated 3 August 1993. They hear appeals concerning family matters covered in book III of the Civil Code and appeals in guardianship and criminal proceedings involving children and adolescents. Only one family division exists, in Lima.

805. Special courts. The minors courts were converted into children's and adolescents' courts. Subsequently, by Administrative Decision No. 025.CME.PJ, the Executive Commission of the Judiciary converted the children's and adolescents' courts into family courts. Administrative Decision No. 028-96-P-CSJL of the Lima judicial district expanded the competence of these courts in civil matters, starting on 1 April 1996. Act No. 26819 of 25 June 1998 amended the Organic Law of the Judiciary by renaming the children's and adolescents' courts

and replacing them by family courts, specifying their area of competence. There are 56 special family courts in Peru.

806. In 1997, by Administrative Decision No. 032-97-P-CSJL, the Supreme Court of Justice of Lima subdivided the competence of the Lima family courts in criminal matters; in other words, they are given exclusive competence in proceedings involving adolescent offenders. Subsequently, in Administrative Decision No. 425-CME-PJ, the Executive Commission of the Judiciary further subdivided the family courts by designating those which have exclusive competence in cases of guardianship and family violence. Of the 14 family courts, three deal exclusively with criminal matters (adolescent offenders), two deal with cases of guardianship and family violence (abandonment, abuse, guardianship adoptions and family violence) and the nine others deal with civil matters (alimony, custody, guardianship, etc.).

807. The judge directs the proceedings and is therefore responsible for the conduct, organization and evolution of due process. The judge's principal powers include the authority to settle cases involving civil, criminal and guardianship matters, to use precautionary and restraining measures during the proceedings, enlisting police support if necessary, nd to order protection or rehabilitative measures (art. 161 of the Children's and Adolescents' Code).

808. Procurators. Before June 1993, there were no special procurators for minors. Recently, following the entry into force of the Children's and Adolescents' Code, the first three procurators for children and adolescents were appointed at the national level. More were appointed subsequently and there are now 52 provincial family procurators (the name was changed to reflect changes in the Judiciary). Each procurator has a provincial procurator and an assistant procurator. The procurator's main function is to ensure respect for the rights and guarantees of children and adolescents, initiating appropriate legal actions (judicial or extrajudicial) either ex officio or on application.

809. The procurator is the person who institutes proceedings and who therefore bears the burden of proof in proceedings involving adolescent offenders. In the exercise of his powers, the procurator has free access to any place where it is presumed that the rights of a child or adolescent have been violated. The procurator issues an opinion in cases where this is required, with written substantiation, after the evidence has been heard and before the sentencing.

810. Defence lawyer. The State, through the Ministry of Justice, decides the number of court-appointed lawyers who provide complete judicial assistance without charge to children and adolescents requesting it. In June 1993, 12 court-appointed defence lawyers were designated for the courts of Lima and Callao. The number of court-appointed lawyers was subsequently increased to 37 throughout Peru, of whom 22 are assigned to Lima and Callao.

811. The defence of adolescent offenders who do not have a lawyer is provided by the court-appointed defence lawyer assigned to the court; if for some reason there is no court-appointed lawyer, a temporary replacement will be appointed (art. 172 of the Children's and Adolescents' Code).

812. Unfortunately no statistics are available for the period covered by this report on the cases in which court-appointed lawyers assisted. However, data

provided by the Ministry of Justice indicate that in 1996 court-appointed defence lawyers in the country's family courts assisted in 12,778 cases.

Auxiliary organs involved in the administration of justice

813. The multidisciplinary team, composed of physicians, teachers, psychologists and social workers, has the task of preparing any reports requested by the judge and the procurator, following up on the measures adopted by providing a technical opinion for evaluation purposes and recommending appropriate measures.

814. This multidisciplinary team is not always available in the courts; some courts have only a social worker, who simply provides a diagnosis after interviews in court or home visits. This is inconvenient for the families, who have to pay the cost of the social worker's travel for the visits. The diagnosis and rehabilitation centres have these professionals, but in limited and insufficient numbers.

815. Special police. Decision No. 1002-84-GC of 17 April 1984 established the Minors' Police Directorate, with a staff of 477 divided as follows: general officer (1); superior officers (15); subordinate officers (25), service officers (8); subordinate personnel (F=220, M=165); specialists (F=15, M=8) and civilian employees (F=20, M=10).

816. Decree Law No. 26102 of 28 December 1992, which promulgated the Children's and Adolescents' Code, established a special police force to assist and collaborate with the agencies designated by the State in activities of education, prevention and protection of children and adolescents. The new name of the Directorate is Police Division for Children and Adolescents (DIVIPOLNA).

Table X.1

Police staff in the Police Division for Children and Adolescents (by years)

	Officers			Subordinate officers		Subordinate health officers	
Year	Police	Service	Health	Male	Female	Male	Female
1992	19	6	-	85	134	3	7
1993	11	9	2	101	135	3	7
1994	26	5	1	98	147	3	7
1995	14	4	2	124	148	3	7
1996	18	4	1	78	90	3	7
1997	17	5	-	69	82	3	7

Source: DIVIPOLNA.

817. At present the Police Division for Children and Adolescents has the following sub-units: Preventive Centre No. 1 at Salamanca; Preventive Centre No. 2 at La Punta; Preventive Centre No. 3 at Barranco; Preventive Centre No. 5

at Zarumilla; and "San Martín de Porres" Occupational Preventive Centre in the district of the same name. It should be noted that all these preventive centres are in Lima, the capital of Peru. In addition, there are police stations which have a section dealing with offences against children and adolescents and family violence.

818. Police unit assisting in judicial matters involving children and adolescents. The staff of this unit are responsible for serving notices at the request of the competent judicial and procuratorial authority and collaborating in the protection measures ordered by the judge. Each family court in Lima currently has support police assigned to it.

819. Forensic medicine unit. This is a special service provided without charge to children and adolescents. It is suitably equipped, located at a different place from the service for adults and staffed with properly trained personnel.

820. Register of adolescent offenders. A special register has been created in the Higher Court. It contains confidential information on the protective and rehabilitative measures imposed by the judge on adolescent offenders. The register did not become operational until 1994.

Deprivation of liberty

821. Peruvian legislation specifies the age at which persons may be tried for actions classified as offences under the law. The age established by articles 207 and 208 of the Children's and Adolescents' Code is 12 years; in other words, the onset of adolescence. The reason for this provision is that a child under 12 years of age is not responsible for his or her actions, whereas an adolescent is; the fact that adolescents are not liable to prosecution does not mean that they are exempt from criminal liability.

822. Before initiating judicial proceedings, the Public Prosecutor's Department may dismiss the case, as a means of cancelling the proceedings, in order to eliminate the negative effects of judicial proceedings. Once the proceedings have begun and at any stage of the process, the judge or the division of the court may dismiss the case, at which point the proceedings cease. The consent of the adolescent is required for a case to be dismissed.

823. In accordance with the provisions of article 223 of the Children's and Adolescents' Code, the family procurator may order the case to be dismissed, if the act committed was not serious and the adolescent and his or her parents agree to undergo counselling.

824. Once the judicial proceedings have begun, the family judge may dismiss the case in accordance with articles 238 et seq. of the Children's and Adolescents' Code. The adolescent's consent to dismissal does not signify acknowledgement of guilt and does not give rise to a criminal record. An adolescent whose case is dismissed will be subject to the appropriate protective or rehabilitative measure, excluding placement.

Alternatives to placement

825. Under Peruvian legislation, the following rehabilitative measures may be ordered as alternatives to placement: protection, reprimand, community service and supervised liberty.

826. In the application of these measures, there is no discrimination against adolescents on grounds of age, sex, religion, rural or urban residence or social and ethnic origin. The only requirement for their application is that parents or other persons responsible for the adolescent must ensure that the measure imposed by the judicial entity is carried out. The one exception is the measure of protection, which is applied in cases where the adolescent is not protected by his or her parents and which consists of "institutionalization", a legal concept meaning that adolescents are entrusted to the care of some relative who will be responsible for them or are placed with a foster family.

827. No adolescent may be subjected to a rehabilitative measure which is not provided for in the Code. In addition, in order to prevent abuse, the Code specifies the maximum length of time for the application of each measure. For example, for community service the maximum is six months, for supervised liberty it is eight months and for placement it is three years.

Placement as a rehabilitative measure

828. Articles 5, 209 and 217 of the Children's and Adolescents' Code establish that every child and adolescent has the right to liberty and that no adolescent may be detained except by a written and substantiated order from the judge, giving reasons, or from the police authorities in the case of a criminal offence detected during commission.

829. Placement (preventive detention or a rehabilitative measure) is used only in extreme cases. When applied as a rehabilitative measure, it may not exceed three years. The only exception is in cases of terrorism, for which Act No. 26477 establishes that the minimum penalty is three years and the maximum penalty is six years, and in cases in which it can be said that there has been discriminatory treatment. However, this is because of the very serious situation facing Peru as a result of terrorism. Since adolescents are not liable to prosecution and since placement is a lenient measure, terrorists tried to kidnap adolescents to swell their ranks. When this law was enacted, the use of adolescents for terrorist activities declined considerably.

830. Adolescents are never in placement with adults. Moreover, from the time of their arrest adolescents held at police stations must be kept in special areas away from arrested adults, since this is in the best interests of the child.

831. Reflecting the Convention on the Rights of the Child, articles 226 and 255 of the Children's and Adolescents' Code enumerate adolescents' rights during placement, without prejudice to any others which may be applicable:

- Right to fair treatment;

- Right to be placed in facilities which meet standards of hygiene and are appropriate to their needs;

- Right to receive education and vocational or technical training;
- Right to engage in recreational activities;
- Right to practice their religion;
- Right to receive medical care;
- Right to engage in paid work to supplement the instruction given;
- Right to maintain contact with their families through twice-weekly visits or by telephone;
- Right to communicate privately with their lawyer and to request audiences with the procurator and the judge;
- Right to have access to media information;
- Right, when released, to receive personal documents necessary for their advancement in society; and
- Right to challenge the disciplinary measures adopted by the authorities of the institution.

Legal advice for adolescents

832. Adolescents are entitled to free legal assistance from the court-appointed defence lawyer, from the time when the police announce their arrest to the procurator, which announcement must be made within 24 hours. It should be recalled that any statement made by an adolescent to the police without the presence of a representative of the Public Prosecutor's Department is null and void. However, it is true that there are not enough family procurators and it is not possible for them to deal with all the communications from police offices during the short time when the minor is there - a maximum of 24 hours. In cases which are not serious, the police are allowed to release the adolescent to his or her parents after verifying the address and obtaining a promise that they will appear when summoned by the procurator.

833. If adolescents believe that they have been deprived of their liberty illegally or arbitrarily, they may challenge the order and bring an action of habeas corpus, as specified in article 10 of the Children's and Adolescents' Code, in accordance with Act No. 23506 of December 1982.

834. Article 200 of the Peruvian Political Constitution establishes constitutional guarantees. Paragraph 1 states that the action of habeas corpus may be brought to prevent the commission or omission by any authority, official or person of an act that may injure or threaten individual liberty or related constitutional rights.

835. The action of habeas corpus must be brought while the right to individual liberty is being violated; otherwise it will not be admissible. This action may be brought by the adolescent or by any other person on his or her behalf; no formalities are required and the action may be oral or written.

836. The judge responsible for such cases is the special criminal judge. In the case of an arbitrary or illegal arrest, the judge will order the responsible authority to produce the arrested adolescent the same day and to explain its conduct. If it is found that the arrest was arbitrary, the adolescent will be released immediately and the appropriate criminal procurator will be informed so that the appropriate complaint may be brought against the person who violated the law. An action of habeas corpus must be resolved within 24 hours.

Training for staff of institutions involved in the administration of justice

837. The Supreme Court of Justice and the Public Prosecutor's Department, with the assistance of UNICEF, organized an international course on the Children's and Adolescents' Code and its new doctrine. The course was attended by representatives of all the institutions involved in the administration of justice (judges, procurators, court-appointed defence lawyers and members of the police force) and included presentations by international specialists and case studies.

838. The topics concerning the administration of criminal justice included the following: from irregular situations to total protection, the new justice for children and adolescents; non-liability to prosecution; role of the Public Prosecutor's Department in the new justice for children and adolescents; and the adolescent offender as a legal category - rehabilitative measures.

839. For their part, each of the institutions trained their staff within the framework of national and international legislation. One example was the training course on the care and treatment of children and adolescents organized for the Peruvian National Police, with the help of the non-governmental organization Radda Barnen. Module II referred to the legislation on children and the family and covered the law on family violence, the United Nations Standard Minimum Rules for the Administration of Juvenile Justice, the United Nations Rules for the Protection of Juveniles Deprived of their Liberty, the United Nations Guidelines for the Prevention of Juvenile Delinquency and the Guide to Police Procedures for the treatment and handling of children and adolescents.

Achievements and difficulties

840. With the enactment and entry into force of the Children's and Adolescents' Code, the procedures for dealing with adolescent offenders were modified, the minors' courts were renamed children's and adolescents' courts and two new concepts emerged which had previously not existed for the administration of juvenile justice: the special procurators for children and adolescents and the court-appointed defence lawyers responsible for defending the presumed adolescent offender. The adolescent or his or her parents may appoint their own defence lawyer to replace the court-appointed lawyer.

841. Among the significant changes which occurred in the juridical order in 1997, mention may be made of the alternatives for conflict resolution. Act No. 26872 concerning extrajudicial mediation is a valuable instrument which will help to relieve the backlog of cases existing in the system of administration of justice. It should also bring about a change of attitude

towards conflict, by promoting conflict resolution as a means of promoting the consolidation of peace and democracy in Peru.

842. Act No. 26972 may thus be considered as one of the principal legislative enactments of 1997, in view of its importance to the modernization of the Judiciary. Now, using this valuable alternative machinery for conflict resolution, a problem may be referred to a mediation centre before any judicial proceedings are instituted. According to numerous experts in Peru, the Act in no way affects judicial authority but merely provides an alternative designed to give users easier access to systems for the settlement of disputes.

843. This provides users with extra guarantees of access to justice and protects their right to resort to the judicial authority if they see fit. This Act, which entered into force in January 1997, establishes that mediation is conducted at a single hearing, held at a mediation centre or before a justice of the peace.

844. This machinery will be closely supervised by the Ministry of Justice, as the entity designated by law to promote, publicize and supervise it. The process is very simple, takes place over a very short period of time and culminates in an agreement which will be binding on the parties and will be known as the memorandum of mediation. This system will not only introduce flexibility and transparency in the settlement of civil disputes but will, above all, foster a new mentality among lawyers and others working in the administration of justice.

845. A reform of the Judiciary has been initiated in Peru and will gradually make it possible to meet the most pressing demands of citizens with regard to the administration of justice, while recognizing the importance of juridical guarantees for the country's development.

846. All the administrative measures adopted since the current process of judicial reform began in November 1995 have focused on the magistrates, who perform leadership functions both in the Executive Commission of the Judiciary and in the 18 working commissions dealing with various subjects. Thanks to the strong support of judges and members throughout the country, a very successful effort is being made to tackle one of the most serious problems in the sector - the backlog of cases. So far 80 per cent of the backlog has been eliminated. For this purpose, 150 temporary judicial organs were created throughout the country. Most important, however, is the fact that fewer staff were required.

847. With the improvements in the Judiciary, it has been possible to introduce modern management in the courts, through the new judicial organization, in which the problems of the traditional system have been solved through a transparent, orderly and completely computerized system that enables the judge to devote himself exclusively to the task of administering justice.

848. The various divisions of the Supreme Court have become the ultimate judicial forum for offences which, because of their nature, require special treatment. There are now divisions which specialize in drug trafficking offences, offences committed by gangs, tax offences and proceedings relating to action under administrative law. As a result, it has been possible to establish

a consistent judicial practice to be followed in such cases and to handle proceedings in a more orderly manner.

849. In the area of criminal justice, mention must be made of the depenalization of prisons. The creation of prison courts in judicial districts throughout the country has made it possible to eliminate the existing backlog of cases, so that only cases initiated during the current year are being processed. Under this system, judges and members travel to prisons in order to hear cases in specially equipped premises; this eliminates the unpleasant spectacle of prisoners being transported to court, with the possibility of escapes and of corruption.

850. Following these changes, it is now possible at this stage of the proceedings to extend the administration of justice to remote populations in Peru which had serious difficulty reaching a court and even more difficulty reaching a court of second instance. Access to justice has improved as a result.

851. Among the actions taken to resolve these problems, mention should be made of the creation of travelling and decentralized court divisions at various places in Peru. These are designed to bring the administration of justice closer to the inhabitants of districts which are close to each other but far from the seat of the court, principally marginalized urban areas suffering from under-development and severe poverty and frontier areas.

852. The difficulties encountered over recent years in the implementation of the Children's and Adolescents' Code include the following:

- Lack of specialization and training among judges, procurators and lawyers who were used to the previous system and in some cases are reluctant to apply the new legislation;

- The fact that, before the new legislation, diagnosis and rehabilitation centres were accessible only to judges and staff of the centres, resulting in a series of abuses, such as reluctance to allow lawyers to visit their clients;

- The general population espouses the traditional approach that any person who errs must be punished. This means that adolescents' parents tended not to attend hearings and took little interest in them and that adolescents were placed for that reason and not because of the seriousness of the offence; and

- Ignorance of the existence of court-appointed defence lawyers and the unusual circumstance of their being provided by the State created mistrust and discouraged collaboration.

853. These problems have now been solved, through publicity about the rights of children using posters and information brochures, as well as information discussions at the actual diagnosis and rehabilitation centres for adolescents placed there.

854. It has not yet been possible to attain the goal of rehabilitation and reinsertion of the adolescent in the family environment and in society, despite the efforts made by the staff of the centres; this is because of the lack of appropriate infrastructure and the lack of sufficient human resources to provide appropriate and personalized assistance to each adolescent. At present, only evaluation and diagnostic work is being done.

Penalties applicable to minors and, in particular, prohibition of the death penalty and of life imprisonment

855. Under Peruvian legislation, three years is the maximum duration for the rehabilitative measure of placement, with the exception of cases of terrorism in which it is six years. Life imprisonment and death sentences are not imposed on adolescents (art. 250 of the Children's and Adolescents' Code).

856. The fact that Peru signed the Convention on the Rights of the Child and that the other international provisions have been adopted in Peruvian legislation reflects considerable progress in this area, since there has been a radical change in the system of administration of justice in the case of adolescents who break the law. Although it is true that they were not liable to life imprisonment, they were liable to placement for an indefinite period and there could be no appeal against such decisions. Now adolescent offenders have been provided with a series of guarantees and rights, so that many cases of ill-treatment at placement centres have been eliminated. It was definitely not easy to solve these problems and firm measures were sometimes required to enforce the law.

857. For example, in March 1997, the following events occurred at the Lima Centre for Diagnosis and Rehabilitation of Adolescent Offenders (the former Maranga Juvenile Centre). The adolescents had planned a mass escape and, for this purpose, had dug a tunnel from inside the Centre to the outside. Their plans were thwarted by the discovery of the segment of the tunnel located outside the Centre. In these circumstances, the appropriate family procurator's office met at the Centre and found not only that there was a tunnel but also that there was a hole communicating with another wing where adolescent offenders were being held.

858. The investigations conducted and the statements by several adolescents revealed that the escape plans involved all the inmates of the Centre, including those in the wing where adolescents sentenced for terrorism were being held. Since the Centre did not meet the required standards of security, it was decided to transfer the high-risk adolescents to the Quenqoro Juvenile Centre in the department of Cuzco. It should be mentioned that most of them had attained their majority or were about to do so. They were being held in a centre for adolescents because article 254 of the Children's and Adolescents' Code specifies that, even if adolescents attain their majority, the placement period must run its course, so that they could remain in the centre until they reach 21 years of age, at which time placement would automatically end. This transfer did not cause any delay in the normal conduct of proceedings, since the responsible court went to the city of Cuzco in order to conduct the necessary formalities. Many of the adolescents concerned have now been released.

Physical and mental recovery and social reintegration of children

859. The diagnosis and rehabilitation centres have a technical team composed of social workers, psychologists, physicians, lawyers and educators to work on the physical and mental recovery and social reintegration of adolescents.

860. Adolescents arriving at a diagnosis and rehabilitation centre receive a comprehensive evaluation by the technical team. The centre decides what physical and psychological treatment they should receive. Depending on their wishes, they attend workshops in order to learn and develop skills. However, as stated previously, the goals often cannot be met because of staff shortages or lack of materials to operate the workshops.

861. Following the report prepared by the Division for Operations of Juvenile Centres, a transitional directive has now been issued on the routine to be followed at placement centres throughout Peru and programmes of vocational training are gradually being introduced for the inmates. This involves recruitment of instructors in serigraphics, electricity, hairdressing, dressmaking and shoe making, purchase of tools and equipment of work areas.

862. In future it is hoped that it will be possible to meet academic needs, so that adolescents leaving the centre will have the option of continuing their studies and learning a trade.

C. Children and adolescents subjected to exploitation: their physical and mental recovery and social reintegration

863. The Peruvian Political Constitution of 20 December 1993 establishes the rights of children and adolescents in the following articles: article 2, paragraph 2 (right to moral, mental and physical integrity, unrestricted development and wellbeing of the human person), article 15 (freedom to work, subject to the law), article 6 (duty of children to assist their parents), article 10 (right to social security), article 17 (compulsory early, primary and secondary education), article 22 (work as a duty and right), article 23 (special protection of working mothers, disabled persons and minors), article 26 (principles governing labour relations) and article 59 (guarantees of freedom of employment and enterprise).

864. Act No. 25278 of 4 August 1990 ratified the United Nations Convention on the Rights of the Child. Act No. 26102 of 24 December 1992, which promulgated the Children's and Adolescents' Code, is the principal legal regulation governing the employment of adolescents. The Civil Code (Decree Law No. 295 of 24 July 1984) specifies in article 457 that "Minors capable of judgement may be authorized by their parents to engage in an employment, occupation, task or job. In this case, minors may perform the actions required by the regular exercise of such activity, administer property entrusted to them for that purpose or acquired as a result of that activity, enjoy the usufruct of it or dispose of it. The authorization may be revoked for good cause." In addition, in article 458 the same legislation establishes that "Minors capable of judgement are responsible for any harm and damage caused by their illegal actions".

865. Decree Law No. 728 (Act on Job Creation) and the amendments thereto (approved by Supreme Decree No. 05-95-TR) establish and regulate inter alia the

arrangements for vocational training of young people (16 to 25 years of age), internships and apprenticeship contracts (for adolescents over 14 years of age and young people up to 25 years of age). The regulations (Supreme Decree No. 001-96-TR) establish and regulate the arrangements for vocational training of young people, internships and apprenticeship contracts.

866. Decree Law No. 866 created PROMUDEH and transferred to that Ministry the functions of the governing body. Supreme Decree No. 003-97-PROMUDEH approved the 1996-2000 National Plan of Action for Children, which includes activities of prevention, assistance and protection for working children and adolescents. Article 66 of the Children's and Adolescents' Code (Supreme Decree 005-91-TR) recognizes the legal status of independent migrant workers. Ministerial Decision No. 128-94-TR approved National Directive No. 007-04 DNRT on authorization of employment of adolescents.

867. Ministerial Decision No. 316-96-PRES of 25 July 1996 approved and regularized the establishment of the Special Multisectoral Commission for the elaboration and formulation of the 1996-2000 National Plan for Supervision of Child Labour and Protection of Working Adolescents. The aim of this plan of action is to prevent early involvement in the labour market and achieve gradual elimination of child labour, to protect working adolescents (from 12 to 17 years of age) and, for both children and adolescents, to eliminate high-risk and hazardous work.

868. Supreme Decision No. 059-97-PROMUDEH of 8 August 1997 established the National Governing Committee which will be responsible for coordinating, evaluating and following up efforts to achieve the gradual elimination of child labour in Peru.

Prohibitions

869. In articles 60 and 61 of chapter IV of Decree Law No. 26102, Peruvian legislation prohibits certain work by adolescents. It prohibits:

- Work in the subsoil involving lifting of heavy weights and activities in which the adolescent is responsible for security or for the safety of other persons; and

- Night work between 7 p.m. and 7 a.m.

870. Special judges are authorized to oversee the implementation of these provisions and to apply the relevant judicial sanctions, with the intervention of the representative of the Public Prosecutor's Department.

871. Mention should be made of the fact that the Children's and Adolescent's Code always refers to the right of adolescents to work and not to work by children, and does not give a specific definition of hazardous work. However, it states in article 22: "The State recognizes the right of adolescents to work, with the restrictions imposed by this Code, always provided that their work activity does not involve risk or danger for their development or for their physical, mental and emotional health and does not prevent their regular attendance at school". In addition, the second part of article 61 of the Code states that: "The governing body through the labour sector and in coordination

and consultation with labour and industrial trade unions, shall periodically draw up a list of work and activities that are hazardous or harmful to physical or moral health, in which adolescents may not engage".

872. There is very little quantitative or qualitative information on harmful or hazardous activities. However, newspaper articles and specific case studies have documented their existence.

873. Some known hazardous or high-risk work activities are:

- Gold mining on river banks, principally in the department of Madre de Dios. This is one of the better known high-risk activities performed principally by adolescents, who participate in small-scale gold mining in conditions of semi-slavery and exploitation;

- Gallery mining, for instance gold mining in the zone of Mollehuanca in Caravelí, Arequipa; at the San Luis camp and in the Santa Filomena mining village in Lucanas, Ayacucho; and mining of volcanic stone (pumice stone) on Belén hill, Arequipa. On-site checks reveal that these activities mainly involve adolescents exposed to high-risk working conditions: mercury poisoning in the case of gold mining and inhalation of volcanic dust in the case of pumice stone extraction;

- Scavenging and maintenance of informal pig feed depots. In various parts of Peru, children and adolescents separate recyclable material or discarded food to feed pigs. The working conditions are appalling: permanent contact with toxic products and chemical and biological contaminants, risk of various kinds of accidents, wounds from sharp edges, risk of tetanus infection and skin diseases. These and other similar activities destroy the self-image and self-esteem of the children and adolescents concerned;

- Small-scale brick making. The best known case is the brick "farm" on agricultural land in the area of Huachipa and even in Lima, the capital of the Republic of Peru, where children and adolescents of both sexes do piecework, in general as "family help", producing clay bricks. The product is purchased and oven baked by regular firms. The long working hours, heavy weights and inhalation of dust, combined with the poor sanitary conditions existing in the zone, create various problems such as fatigue, occupational postural lumbago, spinal deformities, accidental wounds, dermatitis, parasitosis, etc.;

- Hauling of packages and goods in markets. Some adolescents work in markets in Peru, using carts to load packages which are too heavy for them. This type of work is done in the early morning, in bad weather and in unhealthy conditions. The risks involved are numerous: respiratory diseases, accidents, occupational postural lumbago and muscular pain, keratosis of the palms, assaults and attacks, risk of drug and alcohol consumption and contact with marginalized and delinquent groups, etc.;

- Fish filleting and poultry cutting in markets and at wharves and fishing terminals. The risks relating to this type of work are accidents such as knife wounds or burns caused by boiling water;

- Extraction of construction materials at quarries and other sites. Adolescents known as "stone cutters" work in quarries and climb hills to cut, extract, split and move rocks, which will then be sold for use in the construction industry. The risks involved are falls, bruises and fractures;

- Collection of langoustine larvae in the sea of Tumbes. Adolescents spend more than five hours in the sea collecting larvae which will then be sold; and

- Work in fireworks factories. In various parts of Peru, adolescents handle gunpowder and toxic products used to manufacture fireworks.

874. Most of these activities are performed in Lima. In 1995, the governing body of the System of Assistance to Children and Adolescents conducted field studies to ascertain approximately how many children and adolescents are involved in hazardous or harmful activities.

Programmes of assistance to working children and adolescents

875. There are three public agencies and 22 non-governmental agencies involved in programmes of assistance to working children and adolescents. Of these 25 agencies, four (two public agencies, INABIF and DIVIPOLNA, and two non-governmental agencies, MANTHOC and PRODEI) have branches or provide similar programmes to the Lima programmes in other Peruvian cities. Accordingly, nation-wide there are 61 programmes covering a total of 34 provinces (including Lima and the Constitutional Province of Callao) in 21 departments and the Constitutional Province of Callao.

876. Under the memorandum of understanding between the Governmert of Peru and ILO, signed on 31 July 1996, PROMUDEH approved the establishment of the National Executive Committee for the gradual elimination of child labour. The Committee is composed of representatives of PROMUDEH (one from the Division for the Welfare of Children and Adolescents and one from INABIF) and of the Ministries of Labour and Social Welfare, Education and Health, of the Peruvian National Police, of the International Labour Organization, of UNICEF, of the National Institute of Statistics and Data Processing (INEI), of the National Confederation of Private Business Institutions and of workers' organizations.

877. The main task of this Committee is to define the nature and scope of the strategies and actions to be pursued in Peru, in accordance with the International Programme on the Elimination of Child Labour. This Committee, which has focused on child labour by children under 14 years of age, because of their economic activity and the minimum ages established by the Children's and Adolescents' Code, will concentrate on the prevention of child labour, identifying critical areas in which the conditions may be arising for child labour to occur, recur or expand. Strategies have been evolved for the identification of critical areas of child labour and guidelines for intervention have been defined.

878. Through INABIF, PROMUDEH has been implementing the National Programme of Comprehensive Assistance to Working and Street Children and Adolescents, in order to contribute to their care and protection, reduce the risks which are jeopardizing their all-round development, strengthen family and social ties and ensure their participation in the education system.

879. The Programme is implemented at three levels: the child or adolescent; the family; and the community. It consists of three phases: phase I, motivation: contact - intervention in the street; phase II, sustained assistance: basic attention to immediate needs; phase III, monitoring of development, through referral houses in the communities (sites or premises provided by agencies or grassroots organizations for working children) and hostels for street children.

880. The street educators basically engage in academic reinforcement activities and monitoring of risky behaviour with regard to work, drugs and prostitution. The programme currently exists in eight cities: Lima, Puno, Juliaca, Cuzco, Arequipa, Chimbote, Trujillo and Huancayo.

881. In Lima, work is being done in six zones: zone 1: Central market, Las Malvinas, San Juan de Lurigancho; zone 2: Magdalena, Callao and Ventanilla; zone 3: Parada (wholesale and retail markets and Gamarra); zone 4: Peru Ave., Caquetá and Carabayllo; zone 5: Villa El Salvador, Villa María del Triunfo and San Juan de Miraflores; zone 6: Huachipa (subdivided into three subzones). The Programme reaches 5,570 children and adolescents.

882. In 1996, priority was given to four high-risk zones, in order to end the participation of children and adolescents in hazardous work: Huachipa (brickmakers), Carabayllo (stone cutters), central market (box collectors) and Arequipa (mole children).

(a) Plan for the elimination of stone cutters in Carabayllo. Two zones have so far been identified, centred around the Sol Naciente and Hiroshima settlements, where quarrying takes place. It is estimated that about 90 children and adolescents work there. The programme operates in the zone near the Hiroshima settlement, providing care to 41 recipients from the above-mentioned settlements. At present, through the intervention of the educators, almost all of them attend school regularly.

(b) Plan for the abolition of box collection at the central market. This work is performed at night between 7 p.m. and 1 a.m. and consists of collection of discarded boxes from the streets or garbage dumps. Although exact figures are not available, it is estimated that there are about 100 children and adolescents collecting boxes at the Lima central market and surrounding area. The programme reaches 55 children and 25 adolescents (37 boys and 43 girls).

883. The street educators work directly with the children and adolescents, the families and the community. The Ministry of Labour and Social Welfare has launched a programme of juvenile vocational training. The programme is part of the active policy of improving employment opportunities, especially for the population with few resources, and transforming the system of training in Peru to enable it to respond to the new requirements of an open and competitive economy.

884. Under the above-mentioned programme of juvenile vocational training, it is planned to create conditions in which impoverished young people who are affected by unemployment or underemployment can improve their chances of finding work. This will be done by providing them with training and work experience.

885. The programme was designed to attract all young people between 16 and 25 years of age who meet the following criteria: they are from impoverished homes and they are in a situation of unemployment, underemployment or forced inactivity.

886. Non-governmental organizations are also developing similar programmes, among which mention may be made of:

(a) The programme to develop management skills and alter the social environment of working children and adolescents, developed by the Centre for Social Research and Publications (CESIP). The main purpose of this programme is to develop activities to promote economic management and improve the environment of working children and adolescents. It is also to promote initiatives that will develop and generate alternative solutions to their problems. The central activities are located in the zone of Collique "Paradita Primero de Mayo-Comas", where an agreement was concluded with the leaders of the local Traders' Association. About 40 minors are covered, in addition to the outreach activities conducted in the community.

(b) The programme of alternative education for children and adolescents, developed by the Institute for the Project of Integrated Development (PRODEI). The aim of this programme is to encourage socialization of children and adolescents in high-risk situations. The activities take place in Carabayllo (Lima) and in three rural communities in the department of Junín (Ninanya, Matachico and Ahuac), and benefit 136 minors.

887. According to a PROMUDEH survey, the programmes reach 10,415 persons nation-wide. The 1993-1994 compendium of statistics on children, adolescents and women notes that in Peru there are 69,074 working children between 6 and 11 years of age and 366,286 working adolescents between 12 and 17 years of age, giving a national total of 435,360 working minors between 6 and 17 years of age nation-wide. Thus the programmes cover only 2.39 per cent of the national total of working children and adolescents.

Authorization to work

888. Article 5 of the Children's and Adolescents' Code states that "The Ministry of Labour is competent to authorize work by adolescents for other people or in a dependent relationship ...".

889. In this connection, by Ministerial Decision No. 128-94-TR the Ministry of Labour and Social Welfare approved National Directive No. 007-94-DNRT (National Directorate of Labour Relations) concerning authorization for adolescents to work. This provides guidelines for the correct application of Decree Law No. 26102.

890. The Ministry of Labour and Social Welfare issues work permits to adolescents between 14 and 17 years of age for the following activities: to

minors aged 14 for non-industrial agricultural work; to minors aged 15 for work in commercial fisheries, trade or mining; and to minors aged 16 for work in commercial fisheries.

891. In the case of other activities not mentioned above, work permits will be issued as of 12 years of age, as specified by law (art. 54 of the Children's and Adolescents' Code; Ministerial Decision No. 128-94-TR). It should be noted that it is presumed that adolescents living at home are authorized to work by their parents or persons responsible for them, in the absence of explicit statements to the contrary.

892. Working hours vary according to the age of the adolescent worker. It is specified that:

- Adolescents between 12 and 14 years of age may not work more than four hours a day or 24 hours a week; and that

- Adolescents between 15 and 17 years of age may not work more than six hours a day or 36 hours a week (art. 59 of the Children's and Adolescents' Code; Ministerial Decision No. 128-94-TR).

893. Article 60 of the Code prohibits night work (between 7 p.m. and 7 a.m.) by adolescents, except when specially authorized by the judge; in such cases, the adolescent must be between 15 and 17 years of age and the work must not exceed four hours a day.

894. The working conditions of adolescents are checked by scheduled inspection visits. During the inspection the following features are observed (Ministerial Decision No. 128-94-TR):

- If minors are working in the establishment being inspected, their work permits will be checked;

- The inspector checks whether the adolescent is performing the work mentioned in the work permit, the hours, remuneration and, where appropriate, the social security protecting the adolescent;

- The inspector checks whether the employer has included the adolescent worker in the staffing table; and

- The inspector checks the environmental conditions of work, exposure to risk (noise, humidity, temperature, harmful substances, dust, smoke, vapours, etc.).

895. Failure to comply with the provisions of Ministerial Decision No. 128-94-TR gives rise to a financial penalty (fine), in accordance with the criteria established in article 3 of Ministerial Decision No. 030-97-TR. The fine is calculated on the basis of the Tax Liability Unit, equivalent to 2,200 new soles. The fine is currently 6 Units or 14,400 new soles (US$ 5,334).

896. In order to promote the principles embodied in article 32, paragraph 2, of the United Nations Convention on the Rights of the Child, with the assistance

of the Ministry of Labour and Social Welfare in the protection of working adolescents, the following medium-term plan has been developed.

897. Inspections are scheduled at centres where adolescents work. The purpose is to adapt the Ministry's inspection system to the situation and needs of adolescent workers. This will be done through a two-pronged approach:

- Scheduled inspections. These will be conducted in accordance with a schedule drawn up by the inspecting authority, in order to inform the employer and the adolescent worker of their duties and rights, so as to ensure compliance with the law, and

- Special inspections. These will be conducted at the request of a minor worker or a representative or at the suggestion of the Ministry of Labour.

898. The rights of adolescent workers are protected. The rights embodied in the Children's and Adolescents' Code will be publicized by means of:

- Information campaigns about the guidance available from the Ministry of Labour, so as to benefit the population directly; and

- Complaints by adolescent workers of violations of their rights by employers, either directly or through a representative.

899. Through the office of the procurator for crime prevention, the Public Prosecutor's Department is engaged in a series of activities at schools and children's and adolescents' clubs in order to provide guidance on various topics such as child labour, drugs and alcoholism.

900. On-site visits are also made to check for violations of the law and any complaints of such violations are investigated. In this way cases of exploitation are discovered, particularly exploitation of minors from the provinces of humble origins, who are obliged to work from 12 to 14 hours a day, living at their place of work and given very little food. In fact, parents themselves often believe unscrupulous people who persuade them to send their children to work in the capital, in order to earn money to send home. These cases are reported by the Public Prosecutor's Department and tried by the corresponding criminal authority.

International conventions and instruments to which Peru is a party

901. Peru has ratified the following international agreements, which are part of the national legislation:

- United Nations Convention on the Rights of the Child, approved by Peru by Act No. 25278 of 4 August 1990;

- ILO Convention No. 10 concerning the Age for Admission of Children to Employment in Agriculture, approved by Legislative Decision No. 13284 and ratified on 1 February 1960;

- ILO Convention No. 59 Fixing the Minimum Age for Admission of Children to Industrial Employment, approved by Legislative Decision No. 14033 and ratified on 4 April 1962;

- ILO Convention No. 112 concerning the Minimum Age for Admission to Employment as Fishermen, approved by Legislative Decision No. 14033 and ratified on 4 April 1962;

- Financing Agreement between the European Community and the Republic of Peru for execution of the project "Urban Peripheries", signed on 31 August 1995; and

- Memorandum of understanding between the Government of Peru and ILO for the implementation of the International Programme on the Elimination of Child Labour (IPEC) of 31 July 1996.

902. Programmes of international technical cooperation and assistance include the International Programme on the Elimination of Child Labour (IPEC). Peru is one of the beneficiaries of this United Nations programme, launched in 1992. The main aim of the Programme is gradually to eliminate child labour, creating a world movement to combat it, and to reinforce national capacity to tackle the problems to which it gives rise.

903. The Programme is concerned mainly with children who are working in degrading conditions, in hazardous activities and in conditions of slavery, abuse or servitude. A major concern is very young children (under 12 years of age). During 1996, IPEC expanded considerably and was incorporated in the programmes of several nations. In addition, five more countries were enlisted as donors to the Programme, raising to 31 the number of participating countries.

904. The Programme is achieving its goals through concerted action opposing child labour. For this purpose, IPEC suggests strategies and mechanisms which participating countries should adopt in order to achieve the gradual elimination of child labour. It should be noted that these strategies may be different depending on the country where they are to be used: although basically the problem is the same, it must be remembered that each country has different cultures, customs, problems and needs.

905. With the support of the European Community, the project "Urban Peripheries" is aimed at children in especially difficult circumstances, particularly working children under 12 years of age and children who because of their work are unable to engage in basic educational activities and are therefore considered to be at high risk.

906. The project has the following objectives: to improve living conditions in the marginalized urban areas of Peru, introducing improvements in the basic elements of attitudes and behaviour with regard to children's and adolescents' right to support, health and education; to make civil society and the public authorities aware of the problem; and to evaluate the conditions of child and juvenile labour in Peru and gradually abolish the concept of children working when they are under 12 years of age, when the work is hazardous and/or when they are jeopardizing their education.

907. Activities will take place in five Peruvian cities with large numbers of minors affected by this problem and seven cities with a high rate of poverty. The strategy reflects a multisectoral approach involving representatives of the Ministries of the Advancement of Women and Human Development, Justice, Health, Education and Labour and municipalities in Peru and is geared to strengthening local capacities so as to establish an integrated care network consisting of a referral centre, hostel and homes for minor workers.

Drug abuse

908. Decree Law No. 824 (Act on measures to control drug trafficking) was enacted in 1996 and created the Commission to Combat Drug Use (CONTRADROGAS) to strengthen efforts to combat drug use, support for rehabilitation of drug addicts and substitution of coca crops.

909. Supreme Decree No. 013-97-PCM specified the functions of this Commission and the composition of its governing body, which reflects the importance attached by the Peruvian Government to the task of CONTRADROGAS. The governing body is composed of five Ministers: the Ministers of Health, PROMUDEH, Presidency, Interior and Agriculture.

910. The promulgation of this law was a very important milestone in the struggle to combat drug abuse, because it covers not only preventive programmes but also rehabilitation of drug addicts, in parallel to programmes to develop alternatives to coca cultivation.

911. The objectives of the programme of prevention and rehabilitation are:

- To prevent and reduce drug use and the number of drug addicts nation-wide;

- To halt the trend towards starting drug use at an earlier age, through the creation and/or strengthening of effective prevention programmes;

- To adapt treatment, rehabilitation and social reinsertion to the needs and characteristics of drug addicts and to the cultural, economic and social contexts;

- To promote research, training and dissemination of experience in order to improve the quality of prevention and rehabilitation programmes; and

- To create awareness and mobilize public opinion and leaders in a global strategy to combat drugs which will include production, traffic, micromarketing, prevention, rehabilitation and prohibition and generate ongoing support for alternative development.

912. In order to meet the objectives, the programme has been subdivided into the following subprogrammes: prevention subprogrammes (family and community intervention, prevention in the education system, rehabilitation and assistance, proper use of free time, prevention in the work environment, and diagnosis, guidance and counselling), rehabilitation subprogrammes (assistance and social

reinsertion) and subprogrammes relating to both prevention and rehabilitation (training, information and documentation, research, investment incentives, and supervision and evaluation).

913. Decree Law No. 22095 (General Act on Drugs) assigns to the education sector activities relating to the prevention of drug abuse. Supreme Decree No. 82-94-PCM also assigned to the education sector the National Plan of Drug Prevention and Control, which is designed to develop a comprehensive prevention programme based on complete epidemiological studies. The plan would not only cover school curriculum needs but would also be versatile enough to convince the population that prevention should be an ongoing attitude, towards and against drugs.

914. The functions assigned to the education sector by Decree Law No. 22095 and Supreme Decree No. 82-94-PCM were transferred to PROMUDEH. Supreme Decree No. 009-86-JUS prohibits the sale to minors of contact glue, diluent mixtures and other products of similar composition and use. Decree Law No. 26102 (Children's and Adolescents' Code) states in article 37 that "Children and adolescents addicted to toxic substances which create dependency shall receive special treatment from the health sector. The governing body shall promote and coordinate policies of prevention, treatment and rehabilitation for these children and adolescents in the public and private sectors". Article 297 of the Penal Code, amended by Act No. 26223, states in paragraph 5 that use of a minor or any person not liable to prosecution for the commission of the crime of illicit drug trafficking constitutes an aggravating factor.

915. Campaigns were conducted to inform people and warn them not to be taken by surprise and used, and to make them aware of the consequences of becoming involved in illicit drug trafficking. This campaign was conducted because at one time children and old people were being used frequently to transport drugs. The campaign produced results and the use of children to transport drugs has decreased noticeably.

916. The international agreements in force include: the operational agreement between the Governments of the Republic of Peru and of the United States of America on the project for bilateral drug control, ratified by Supreme Decree No. 031-96-RE of August 1996. The goal is to develop, improve and support the competent Peruvian institutions in the design and execution of all aspects of the National Plan of Drug Prevention and Control.

917. In 1991, as part of the programme of education and prevention of drug abuse, the means, objectives and strategies of prevention were added to the secondary school curriculum for minors. This involved the participation of 1,997 public and private schools, training for 56,363 teachers and participation of 1,187,191 students between 1991 and 1996. In addition, a workshop course was organized at schools for parents throughout the nation.

918. The measures adopted by the State are primarily geared to the prevention of drug abuse . The activities included: publication of educational material and information; training; supervision of multidisciplinary technical teams engaged in prevention; and community mobilization and recreation.

919. The Centre for Information and Education for the Prevention of Drug Abuse (CEDRO), a private non-profit institution, also has programmes to promote education and information on the various aspects of the drug problem, emphasizing its causes and consequences.

920. The Centre has rehabilitation programmes such as the "Listening place", where advice and primary care is provided for drug addicts and their relatives in order to provide information and encourage treatment at clinics and centres specializing in the problem and in order to mobilize families to tackle the problem.

921. The work involves two types of intervention: (a) telephone calls, in which requests for help are received and crisis counselling is provided. This is all part of the health problem created by addiction to psychotropic substances. Since 1992, the frequency of telephone requests has been increasing; and (b) face-to-face counselling, in which brief therapy is provided when the patient or patient's relatives come to the Centre with or without an appointment. The Centre also has therapeutic communities, engages in collaboration with the National Association and has created a network of therapeutic communities.

922. From 1989 to December 1996, the Ministry of Education, through its Technical Committee for Drug Abuse Prevention (COPUID), engaged in various important activities within the framework of a model for the reduction of drug use and as a Peruvian version of comprehensive preventive education.

923. Decree Law No. 866 of 29 October 1996, which established PROMUDEH, assigned to it the task of formulating and executing specific projects for children and adolescents at risk. The projects include prevention of drug use and abuse, day care within the framework of healthy family relations, for which the functions of COPUID were transferred to PROMUDEH.

924. For many years, drug abuse prevention at both the governmental and non-governmental levels was based on concepts of health promotion (in other words, absence of disease) and development of social skills (decision making, assertiveness, self-esteem, etc.). Now a different model is used and emphasis is placed on the need to work with the model of human development as one alternative among other programmes.

925. Preventive work follows a model of reduction of demand for drugs and the achievement of this objective requires a major effort consisting not only of vertical action but also of horizontal actual of mutual trust between the population and the State. In order to achieve this objective, an operational plan for the prevention of drug abuse has been drawn up.

926. The operational plan divides preventive activities into five areas: training, community organization and mobilization, research, educational material and audiovisual communication, and documentation and information. In these areas of work, emphasis is placed on children, adolescents and families who are primarily at risk and in some cases in the process of disintegrating.

927. In addition, PROMUDEH has a project entitled "Network of Teenage Leaders", with the support of the Embassy of the United States of America, designed to

train and involve suitably motivated and trained leaders to set up organizations, grow, become active in the community and develop as a useful grassroots movement for the prevention of drug abuse. The network of teenage leaders is operational in several districts of Lima and Callao; 130 adolescents from 35 institutions in metropolitan Lima participate.

928. The PROMUDEH Division for the Welfare of Children and Adolescents has been involved in various activities with adolescents, among which mention may be made of the following:

- Meeting of adolescents and parents on drug abuse prevention, with 21 participants;
- Fairs for mobilization through the voice of adolescents, with the participation of 1,750 adolescents at 18 events in five districts of metropolitan Lima;
- Inter-district competition through the voice of adolescents, with 900 participants;
- Festival through the voice of adolescents, with 3,000 participants;
- Lecture: drug prevention programme for adolescents, with 118 participants;
- Subregional workshop of total preventive education, with 200 participants; and
- Training for the network of teenage leaders, attended by 180 adolescents.

Measures adopted to prevent tobacco and alcohol use

929. Several legal provisions have been enacted to prevent children and adolescents from using alcohol and tobacco, including: ban on sales to minors; ban on television advertising of these products before 7 p.m. and requirement that commercials must refer to the fact that the products are harmful to health; and, as far as tobacco is concerned, ban on smoking in enclosed public places. A No Tobacco Day has been proclaimed and there are ongoing campaigns of tobacco and alcohol prevention.

930. However, despite these prohibitions and campaigns, the use of tobacco and alcohol is still on the rise in Peru. Minors (mostly boys) usually start smoking and drinking between 12 and 18 years of age. Alcohol and tobacco use is greater in Lima than in inland areas.

Sexual exploitation and abuse

931. There are as yet no evidence or research proving the occurrence of sexual exploitation in Peru. It must exist in some forms but these are generally based on violence, fear and threats. As a result, this is not a highly visible social problem and sexual exploitation is infrequent or non-existent.

932. It is quite difficult to analyze the problem of sexual abuse of Peruvian children and adolescents: the topic still cannot be discussed openly, because sex is still a taboo subject for many Peruvians. In Peru, silence and threats are more powerful than the horror of sexual abuse committed against some children and adolescents.

933. The term "sexual abuse" is not used in Peruvian legislation. The question is dealt with specifically in criminal law, which mentions offences of rape, seduction and indecent assault.

934. Article 173 of the 1991 Criminal Code refers to rape of minors. The wording indicates that the rapist's punishment will be more severe when the victim is younger. Rape is considered to have been committed if the victim is under 14 years of age, even if the victim consented, since the law considers that minors under 14 years of age are not able to take decisions concerning their sexual life and that an offence is therefore assumed to have been committed.

935. If the perpetrator has a position, job or relationship which gives him particular authority over the victim or leads the victim to place her trust in him, this is considered to be an aggravating circumstance. In this type of offence, depending on the circumstances, the penalty is deprivation of liberty ranging from a minimum of 10 years to life imprisonment. As far as seduction is concerned, the law punishes any person who uses deceit to commit a sexual or similar act with a person between 14 and 18 years of age.

936. Previously, article 178 of the Criminal Code waived the penalty if the perpetrator married the victim and this waiver extended to accomplices. After lengthy debate and statement of views, this article was amended by Act No. 26770 of 11 April 1997, so that the waiver applies only to the person who enters into matrimony.

937. In the cases of abuse mentioned above, penetration is presumed to have occurred. However, there is also so-called "indecent assault", in which the perpetrator does not intend to engage in sexual intercourse or similar acts but does engage in actions which are equally distasteful to the victim, such as oral sex, "interfemoral" coitus, touching of genitals, etc.

938. A study conducted by the non-governmental organization Movimiento Manuela Ramos found that, in most investigated cases of sexual abuse, the abuse occurred at the home of the victim or of the perpetrator, in other words places considered to be secure or safe. However, even now it is not possible to obtain actual statistics on cases of sexual abuse, since they are usually not reported because of the parents' attitude, embarrassment about what friends will say and about the fact that attention will be drawn to the children, and the "red tape" involved in filing complaints.

939. The aim of both the legislative and procedural approach to cases of sexual abuse of children and adolescents is to determine whether the criminal act was committed and whether the individual under investigation bears criminal responsibility for the act, so that a penalty may be applied. In addition, therapy is available for sentenced perpetrators; however, there is still no

programme of assistance and care to help the recovery of the assaulted person, considered as victim.

940. The State and other non-governmental agencies are involved in several programmes to prevent and increase awareness of this problem. Sex education is compulsory in schools, using guides prepared by the Ministry of Education, since it is believed that timely and appropriate information at an early age is the best preventive measure.

941. The various publications and published material on sexual abuse include: the book Listen to me, protect me, a special seminar on strategies and techniques for dealing with child abuse, held in December 1995 under the auspices of the mental health subprogramme of the Ministry of Health; My body is my territory, guidelines for the prevention of sexual abuse of children, by Susana Galdós Silva, Movimiento Manuela Ramos; supplementary text for subordinate police officers on the prevention of child abuse and sexual abuse; and "I know myself, I like myself, I take care of myself!", information on sexuality and prevention of child sexual abuse, by María Elena Iglesia (CESIP).

942. The PROMUDEH Division for the Welfare of Children and Adolescents has organized workshops on: Day of Non-Violence against Women, geared to children and teenage mothers; Campaign for the Right to Education; Campaign for the Right to a Name; and participation in the Filiation Campaign.

943. The Division also organized the following activities:

- Cultural festival "We are different, we are equal", attended by about 500 children and adolescents;
- Fourth Annual Conference on the Rights of Children: "The Girl Child: Present with a Future";
- Active participation in the Day of Non-Violence against Women, through the distribution of stickers in various districts of the capital; and
- Discussion forum on the Day of Non-Violence.

D. Children belonging to minorities or indigenous groups

944. There are two main groups of indigenous communities in Peru: one composed of communities in the mountain region speaking Quechua and Aymará; and one composed of Amazonian indigenous communities.

945. According to the 1993 census, the population of indigenous communities numbered 299,218 persons, distributed in 1,450 communities belonging to 65 ethnic groups. Of this total population, 239,674 were counted in the census and 59,544 were estimated inhabitants of distant communities which are difficult to reach and could not be counted. The greatest diversity of ethnic groups is found in the department of Loreto. The following table shows the native communities and their location.

Table X.2

Peru: indigenous communities with a population of over 2,000 inhabitants

Native communities	Department	Number of inhabitants
Achual	Loreto	4,719
Aguaruna	Amazonas, Cajamarca, Loreto and San Martín	45,137
Amuesha	Huánuco, Junín and Pasco	6,980
Campa-Asahaninka	Ayacucho, Cuzco, Junín, Pasco and Ucayali	40,518
Campa del Pichis	Pasco	3,918
Campa-Nomatsiguenga	Junín	5,531
Campa del Ucayali	Huánuco and Ucayali	2,793
Chayahuita	Loreto and San Martín	17,717
Cocama-Cocamilla	Loreto and Ucayali	10,705
Huambisha	Amazonas and Loreto	5,545
Lamas Chachapoyas	San Martín	22,513
Machiquenga	San Martín	8,679
Quichua-Napo-Pastaza	Cuzco and Madre de Dios	10,553
Shipibo-Conibo	Cuzco and Loreto	20,178
Piro	Huánuco, Loreto, Madre de Dios and Ucayali	2,553
Yagua	Loreto	3,487
Campa Pajonalino	Ucayali	3,823

Source: INEI, "Indigenous communities of Peru".

946. These and other indigenous communities are scattered throughout the Peruvian Amazon area, far from the urban centres. However, both the regional governments and non-governmental organizations are working to improve the standard of living of this population. With this aim, various programmes have been implemented such as installation of silos, nutritional programmes, creation of civil registers for the recording of births, and health and education programmes. These activities do not require the communities to give up their cultural and ethnic values, but on the contrary are trying to preserve them or prevent them from being lost.

947. One or more of the rights of the child are implicit in each of the programmes implemented. In order to protect these rights, Ombudsmen for Children have been appointed, who mostly perform parochial and multisectoral activities.

948. In Peru there is constant migration from rural to urban areas, so that the Peruvian capital is inhabited by people from various regions. They all keep their own habits and customs and the population is accustomed to being treated without discrimination.

949. In accordance with article 48 of the Constitution, the official languages of Peru are Spanish and, in certain areas, Quechua, Aymará and the other indigenous languages. The language most used is Spanish; for this reason, at all schools in indigenous communities, during the first few years instruction is

given in the native language or bilingually with Spanish and later all courses are given in Spanish.

950. Bilingual teachers are being trained for this purpose; this year 109 bilingual teachers (Ashaninkas-Aguarunas) were trained in the Loreto region. However, it must be noted that educational progress in these areas is slow, mainly for geographical reasons and also because of the reluctance of the indigenous inhabitants themselves to change certain habits. The indigenous communities have an extremely young demographic structure, because of their high rates of fertility and child mortality.

XI. CONCLUSION

951. An attempt has been made in this periodic report to respond to the requirements of the United Nations Committee on the Rights of the Child. If the report appears incomplete, this is not because of a lack of seriousness in its content or because of failure to consider information provided by Peruvian public and private entities involved in social activities in general and in the welfare of children and adolescents in particular. The material used and the sources cited will continue to be useful for future discussions and additional information that may be required in the future.

952. This conclusion will not repeat what has been said in previous chapters. It will attempt to confirm certain overall trends and to comment on what was learnt during the preparation of this report.

953. Firstly, there have been recent improvements in Peru in the current decade and it is planned to continue the activities and operations of the public institutions involved in the welfare and defence of the rights of children and adolescents. We are confident that in the near future the nation will achieve political stability, consolidation of democratic institutions, creation of an environment conducive to private investment, creation of improved employment opportunities and more space for social peace. The new order will be characterized by continuity, dynamism and participation. There will be continuity of social actions with greater efficiency and more material resources and honest political commitments. There will be dynamism in the participation of private agencies, including non-governmental organizations, in the broad area of leadership and innovative proposals. And there will be participation generating involvement and active responsibility of the population targeted by social actions.

954. With regard to the benefits accruing as byproducts of this report, the following comments may be made. The comparison of the data used in this report with the national reality attracted the attention of officials and workers in public and private institutions currently devoted to the welfare of children and adolescents. In addition, special commissions were set up in certain institutions, such as the Judiciary and the Ministry for the Advancement of Women and Human Development (PROMUDEH). The workshops held in Lima and other Peruvian cities, with the participation of representatives of governmental and non-governmental agencies and of civil society, were enthusiastically received and gave new impetus to work in this area.

955. Lastly, the results obtained through the existing social policy are considered to be proportionate to the scarce resources available. It should also be noted that in the political agenda of the Peruvian Government, as part of the poverty relief plan, Peruvian children occupy a central and special place.